

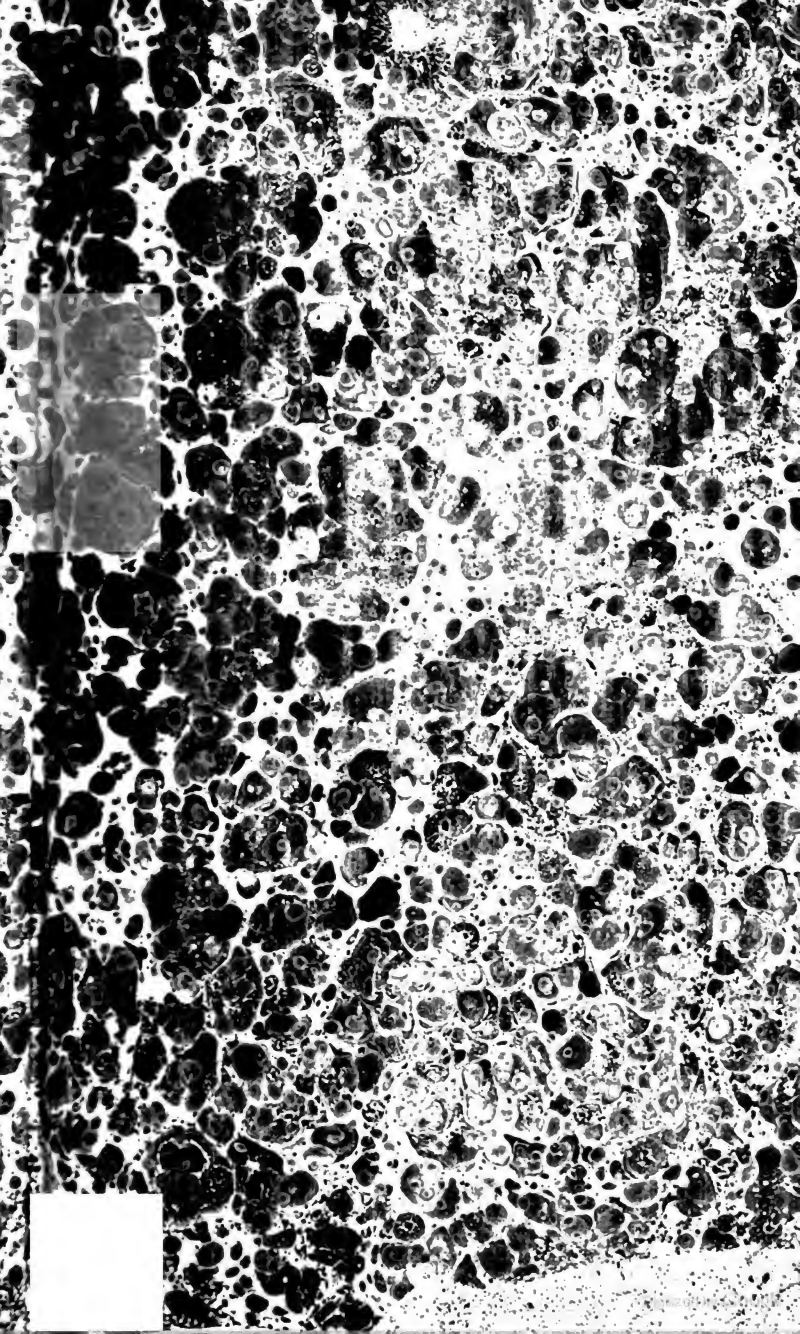
*The Medical
and Physical Journal*

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THE
MEDICAL AND PHYSICAL
JOURNAL.

THE
M E D I C A L
AND
P H Y S I C A L
J O U R N A L.

CONDUCTED BY
T. BRADLEY, M.D.
R. BATTY, M.D.
AND
A. A. NOEHDEN, M.D.

VOL. XII.
FROM JUNE TO DECEMBER, 1804.

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THE
Medical and Physical Journal.

VOL. XII.] JULY 1, 1804. [NO. LXV.

Printed for R. PHILLIPS, by W. Thorne, Red Lion Court, Fleet Street, London.

AN INVETERATE HEAD-ACH, SUCCESSFULLY TREATED,
BY WM. LAMBE, M. D.

THE Rev. Mr. M—s, aged thirty-three, of melancholic temperament, had been afflicted with sick head-ach for sixteen years at the least. The paroxysms were of singular severity, lasting commonly for twenty-four, often for forty-eight hours, during which time he was incapable of any exertion, and generally, for a great part of it, was confined to his bed. These paroxysms were attended with great derangement of the stomach, cructation, frequently with sickness and vomiting. The attacks had recurred at irregular intervals: for the last year or two they had usually happened weekly; sometimes twice a week; for two months only, towards the end of last summer, he had intervals of two or three weeks; but in the autumn and beginning of winter they recurred as frequently and as severely as ever. At all times the bowels were much confined, the faces hard and black, and the stomach perpetually oppressed with flatulence. From medicine, which had been applied under the best advice, he had received occasional benefit; but it never proved permanent, so that he was obliged to content himself with regulating the bowels, for which purpose the constant application of aperient medicines was indispensable. Except these distressing paroxysms, he could not be said to be out of health; the strength, sleep and appetite were natural; but the countenance was always of a dull and sickly paleness.

Having for some time been firmly of opinion, that constitutional diseases are produced by the *ingesta*, and among these, by contaminations of common water more than by all the others, I advised him to try the effect of a course of distilled water, confining himself to it entirely in every article, of which water is a principal ingredient. The proposed course could not be irksome to him, except at
(No. 65.) B 10

to the trouble it would occasion, he never tasting malt liquor, and using wine very sparingly. The continuance of the wine I did not prohibit.

With this advice he has complied, and began the course at Christmas last. His diet, in other respects, has been exactly the same as usual; and the only medicine he has taken are some aperient pills, to which he has been accustomed for some years. In about three weeks, he found very sensible relief. The paroxysms of head-ach recurred as usual, but with much less violence; and ever since the disorder has continued to decline. For the last three months he has been attacked only three times, and then with so little severity, as not to interrupt his usual occupations. The general health has at the same time been materially improved. The flatulence is wholly removed, and the sickly paleness of the countenance has been succeeded by a general appearance of health, which he has not possessed for many years. I think it right to add, that this account has been in a great measure drawn up by himself.

It is impossible to account for so remarkable an effect, in consequence of a change apparently so simple, without suspecting common water to be impregnated, at least occasionally, with some matter of infinitely greater activity, than those which have hitherto been discovered in its composition. Such a matter I have in truth detected, and this detection occasioned me to recommend the course with so much confidence. I believe that the matter I allude to is a product of putrefaction, and that it is very generally diffused through the water applied to domestic uses. This matter I apprehend to be the principal source of the acrimonies, which have been so generally suspected to contaminate the animal fluids. I should have ventured to lay the grounds of these opinions before the public some time ago, had it not been for the extreme difficulties I have met with in the chemical investigations connected with this subject; difficulties, however, which I believe to be very nearly surmounted.

Though head-achs, such as that above described, are commonly free from danger, there are few complaints more unyielding to medicine. A regimen then, which will eradicate so rooted a malady, we may hope to find serviceable in other obstinate and intractable diseases. The instance I have adduced of essential benefit received by this treatment is by no means the only one which I possess. In due time the public shall be enabled to form their own opinion of its merit. In the mean time I am persuaded

suaded that those, who choose to adopt it as an auxiliary to medicine, and in cases where medicine alone is inefficacious, will not be disappointed in any reasonable expectations they may form of its powers.

King's Road, Bedford Row, May 24, 1804.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

CASES of intermittent fever, from their being of rare occurrence in the practice of this Metropolis, seem not to have excited sufficient attention to their mode of treatment. When they do occur, they are imported from marshy countries, where the disease is endemic; and bark, in one form or other, is considered the specific remedy.

Notwithstanding that this disease is produced by marsh miasma, there are many other causes which may *predispose* the body to be acted upon by this unwholesome effluvia, such as cold and moist atmosphere, feeding upon acid fruits, crude and watery vegetables, low living in general; and, in short, every thing that tends to impoverish the fluids and impair the tone of the solids, favour very much the production of this complaint; a sufficient reason why they are found to be more frequent in the former classes of society than among the rich and affluent.

Agues are much more violent in their paroxysms in the country than they are in town, our noxious smokey atmosphere being, as it were, an antidote to this disorder. It is with a view to draw the attention of medical men more particularly to the use of opium in this complaint, that I am induced to publish the two following cases, where it will be seen to have produced the most striking and beneficial effect.

John Gash, a young man of about twenty years of age, of a pallid countenance, and weak lax fibre, became a patient of the Dispensary the seventeenth day of April, for the cure of an intermittent of the quotidian type, which he had contracted during a journey into Essex, where he had not remained eight and forty hours before he was siezed with this complaint; the bark was prescribed for him in doses of ʒj. omni 2d. hora sumd. which he con-

B 2

tinued

tinued taking until the 23d of April following, without any material alteration or benefit in his complaint; when I had occasion to see him in the absence of the attending physician, and ordered him to take the following draught an hour antecedent to the recurrence of the cold fit.

- R. Tinct. Opii. gt. xxxv. Zinzib. ʒj. Aq. menth. pip. ʒjss. M. ft. haust.

This produced a very favourable effect, for the fit was not nearly so violent nor long in its duration as it had been before. On the following day the draught was repeated with the addition of five drops of tinct. opii; the fit was scarcely perceptible. On the third day the draught was again repeated, when the fit did not return, nor has he felt any thing of it since.

Thomas Bentley, ætat. 23, of a habit of body similar to that of the former patient, applied to the Dispensary for the cure of a tertian ague. He had been taking the bark for nearly a fortnight (when I saw him) without any material benefit. I gave him the same draught which had produced so good an effect in the before mentioned case, and the effect here was equally striking and beneficial, the second dose having removed his complaint altogether.

Bark, therefore, although it, with an almost infallible certainty, cures the disease, ought not strictly to be regarded as a *specific* in this complaint, as a specific, properly so called, not merely cures, but is the only thing which *can* cure the malady to which it is applied.

- The practice of giving opium in intermittent fever is neither singular nor novel, it having been adopted by medical practitioners at least half a century ago; in some old authors which I have read, this practice is mentioned, particularly by Dr. Berryatt, a French physician, who avers that he has found Dr. Sydenham's liquid laudanum more infallible in the 'cure of intermittent fever than even the bark itself, a single dose for the most part sufficing; he gave it to the patient in bed, an hour before the cold fit was expected, in doses of twenty-five to thirty drops.

Dr. Lind, an intelligent physician, who appears to have paid a great deal of attention to this disease, speaks very highly as to the effect of this medicine, when given during the hot fit. But, surely, it appears more consistent with the theory of the cold fit depending upon spasm, that to apply the remedy just before its attack, would be more likely to alleviate its violence and shorten its duration, and thus mitigate the violence, and abridge the continuance of the succeeding reaction. I am, &c.

MICHAEL BARTLETT.

Finchbury Dispensary, St. John's Square, May 29, 1804.

TO DR. BRADLEY.

SIR,

AS from the symptoms of the following case, there was great reason to impute them to Hydrocephalus Internus as the cause, and as the treatment has been successful, I request the favour of your inserting it in the Medical and Physical Journal.

I am, &c.

H. L. HELSHAM, M.D.

Stoke Ferry, Norfolk, May 23, 1804.

July 7, 1803, I was applied to for Miss I. S. aged 13 years, who was just come from boarding school for the holidays.

There were evident marks of a slight derangement of intellect in her conversation. She complained of violent pain and throbbing in her head, and the pupil of the right eye was a deal dilated. Her pulse was full and rather slow, but there were no signs of active inflammation.

I ordered two or three leeches to be applied to the temples, her head to be shaved, and a blister laid over it. A pill with gr. j. of calomel to be taken every night, and a julep with tinct. castorei and spir. ammon. com. two or three times in the day. This method was regularly pursued till the 31st. the blisters renewed and kept running, and the leeches occasionally applied, without her having received any permanent benefit.

She then began to rub into the thighs and arms alternately, ʒj. of ung. hydrarg. fort. till her mouth became sore and she spat plentifully.

It was now the symptoms began to give way, and by the 21st of August she seemed to have no complaint but debility, for which she took a decoction of cinchona, and continued it unremittedly till the end of September.

Since then she has had some slight returns of head-ach, which have always been relieved by applying one or two leeches.

REMARKABLE CASE OF A POLYPUS ANTRI HIGHMORI.*

[With an Engraving.]

A Peasant's wife, who lived in a village near Gottingen, about fifty years of age, born of healthy parents, was accidentally struck, when ten years old, in the right cheek with the tooth of a rake, which penetrated nearly one inch deep. She lost a great deal of blood, but the wound closed a short time after. From this period however she was often attacked with acute pains in the maxilla superior, particularly during her menstruation, which occurred for the first time, sparingly, in her nineteenth year. The right cheek began gradually to swell; the pains continued from time to time, and alternated with other rheumatic complaints. When the pains were violent and the cheek much swoln and red, she used to apply cataplasms of aromatic herbs, which greatly relieved her. In her twenty-seventh year she married a peasant, by whom she had two children, who, to the present day, enjoy very good health and are brisk young men. All the time she suffered more or less violent pains, particularly in winter, and the swelling of the cheek proceeded very slowly, till after her last child-birth, when she perceived that the tumour of the cheek increased more evidently; the eyes became a little prominent, and the pains more frequently returned. In this state she remained for many years; but after the cessation of fluxus mensium, which happened in her forty-sixth year, the condition of the patient became considerably worse. The bulb of the right eye protruded from the orbit, without any diminution of sight, the teeth of the upper and lower jaw fell out, the respiration by the nose was much impeded, and the power of smelling quite gone. Speech and manducation became more difficult, and the tumour, protrusion of the eye, &c. extended to the left side. All this time she had never taken the advice of a medical man, but had committed herself to the care of quacks and old women.

In June, 1803, the local affections being exceedingly increased, the pains almost insupportable, and the patient attacked by febrile symptoms, which confined her to her bed, the husband walked to Gottingen, in order to consult

Dr.

* This case is described in Dr. Eichhorn's Inaugural Dissertation de Polypis, &c. Gottingen, 1804.

*Singularities, Section of the Nostrum to show
the internal surface as altered by disease.*

See p. 42.



Printed for Richard Phillips, 71, St. Paul's Church Yard, June 29-1804.

Remarkable Case of a Polypus, with high more

See p. 6.



M.D. Journal N^o 65.

Dr. Noehden, who ordered several remedies, which he thought proper, according to the imperfect relation of this man, who only told him her present condition, without mentioning a syllable of the progress and beginning of her chief complaint. The remedies however operated so well, that within a few weeks the most urgent symptoms were removed, the fever subdued, and the patient able to quit the bed. The diseases of which she now chiefly complained were a dimness of sight, and pains in the upper jaw, but they were much less violent than before. As these symptoms continued, notwithstanding the most efficacious remedies, Dr. N. desired the patient to come to town, that he might see her, which he had not hitherto had an opportunity of doing. The Doctor was surprized at the great deformity of the face; and on examining the patient, and exploring the state in which she was, soon found that she ought to have recourse to the assistance of surgery, and therefore recommended her to Dr. Langenbeck, an able surgeon of that place, at whose house Dr. Eichhorn saw and examined the patient.

The chief symptoms observable at that time were, 1. A swelling of both sides of the maxilla superior, which was hard and a little red. 2. The nasal bones flat. 3. In both cavities of the nose a polypus of a red colour. 4. The bulbs of the eyes much protruded, and the sight diminished. 5. The cornea pellucid. 6. Saccus lacrymalis tumid and inflamed. 7. Puncta lacrymalia shut. 8. A small tumour in the region of the glandula lacrymalis. 9. A continual watering of the eyes. 10. The palate was depressed, rather convex, and yielded like a tumour to the pressure of the finger. Except these symptoms, the patient found herself pretty well; appetite good, pulse soft, and not very frequent. The polypi in the nose induced the present gentlemen to ascribe the above-mentioned deformity, and the attending symptoms, to a similar excrescence which had taken place in the antrum Highmori. On having sufficiently considered the case, Dr. Langenbeck proposed an operation, as the only expedient to save the patient's life, however doubtful its success might seem to be. He intended to have made an incision in the palate, and by this way endeavour to extract the contents of the antrum Highmori; but the patient could not by any means be persuaded to submit to this operation, and returned home without farther medical assistance. Under the care of quacks and old women, to whom the patient had again recourse, the disease evidently increased

8 *Remarkable Case of a Polypus antri Highmori.*

creased in the course of a few months, so that, when Dr. Eichhorn visited her in December, 1803, in order to observe the progress of the disease, and to obtain a drawing of her face, the disease had so far proceeded, as is represented in the annexed engraving.

EXPLANATION OF THE PLATE.

- AA. The tumour of the maxilla superior very considerable.
- BB. The nose formed with the maxilla one even tumour, and could not be distinguished. The bones of these parts soft and yielding to pressure.
- C. A cicatrice where a barber had made an incision.
- DD. The eye-brows, much drawn from one another.
- EE. The bulbs of the eyes enormously protruded and total blindness of both eyes.
- FF. The right saccus lacrymalis very tumid.
- G. The glandula lacrymalis extremely swoln, and extending in form of a bag from the upper eye-lid to the temples.
- H. An opening of the right saccus lacrymalis, from which a thin matter copiously issued.
- I. Puncta lacrymalia extended, and discharging a great deal of matter.
- K. The glandulae meibomianae discharged a similar matter.
- L. The blood-vessels of the membrana conjunctiva much extended, and the conjunctiva tumid, red, and hanging over the inferior eye-lid.
- M. The iris, protruded by the pressure of the crystalline lens, and much distended, seemed to adhere to the interior coating of the cornea. The pupil immoveable.

These symptoms were attended with an insupportable stench, which surrounded the patient, a great emaciation of the body, extreme weakness, want of appetite, sleepless nights, pains, and excruciating heat. Although Dr. Eichhorn offered his assistance, in order to mitigate at least the most excruciating pains, she entirely refused to take any medicine. In this miserable condition she continued for some weeks; and when he saw her last, part of the polypus antri Highmori had come out of the opening H. hanging down to A. A few days after she died.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

I Have sent the Resolution of the Grand Jury at the Assizes at Horsham, relative to the extermination of the small-pox from the county of Sussex; an example which I hope, will soon be followed by every county in England.

In

In consequence of this resolution, I have the pleasure to inform you, a society is already formed; of which His Royal Highness the Prince of Wales is Patron, and Lord Pelham President. It is also supported by the Members for the county, and many other persons of distinction.

I hope soon to receive a copy of the plan of the Society, which I shall not fail to transmit.

I have lately received letters from Dr. McDermot, of Coolavin, near Boyle, in Ireland; informing me, that he has experienced the efficacy of the *spongia usta* in the shape of lozenges, which he never was so fortunate as to experience, when it was given in any other way. He speaks in very handsome terms of your Journal, which was the channel through which I conveyed to the public my remarks on the subject; from a perusal of which, Dr. McDermot was induced to try the practice. He has one obstinate case under his care, which has resisted this and every other remedy that is commonly employed for the disease.

Since I published my observations on the subject, as well as before that time, I have met with some cases which I could not cure; but a greater number which have yielded to the medicine before-mentioned; among which was one of above forty years standing, which greatly impeded respiration and deglutition, and rendered the life of the woman who laboured under it perfectly miserable.

Although the burnt sponge certainly is more efficacious in the form of a lozenge, yet, in one instance, where the patient could not take it in that manner, it succeeded very readily in the form of pills. This case is the only one in which I have known the complaint yield readily, when the medicine was swallowed at once; though I have often given it in pills, as well as in an electuary, and in a liquid form.

How far the bronchocele partakes of the nature of scrofula has been made a question; debility appears to be the pre-disposing cause of both these affections, which occur much more commonly in those of a relaxed habit than in others; and much more commonly in women than in men. I am, &c.

JOHN RING.

*New Street, Hanover Square,
June 14, 1804.*

*Resolutions entered into by the Grand Jury, at Horsham,
the 19th of March, 1804.*

The Honourable JOHN THOMAS CAPEL,
FOREMAN of the GRAND JURY.

RESOLVED,

1. That the Grand Jury do highly approve of any attempt which may be made, to suppress and eradicate that most fatal distemper the small-pox, and are willing, individually, and as far as their influence extends, to further the views of the Royal Jennerian Institution, already established in London for that purpose.

2. That the Grand Jury do strongly recommend to all medical persons, and others, of the county of Sussex, immediately to adopt and encourage the Jennerian system of inoculation, and do request them to transmit such plans on or before the 15th of April, as may appear most conducive to attain the desired object of eradicating the small-pox, to the person who by the Committee hereinafter-mentioned, may appear best qualified for the office of Secretary, and which appointment the Committee are requested to notify in the public prints of the county, as soon as it has taken place.

3. That the undermentioned noblemen and gentlemen, who signed the recommendation of the Jennerian system of inoculation, at the meeting of Deputy Lieutenancy at Lewes, together with the county Members and Foreman of the Grand Jury, be requested to form the Committee, with any other county gentlemen who may be desirous of encouraging this praise-worthy institution.

Names of the Committee :

Lord Pelham,	George Shiffner, Esq.
Lord Gage,	Thomas Partington, Esq.
Lord Sheffield,	General Lenox, } County
Sir J. Bridger,	John Fuller, Esq. } Members.
Thomas Kemp, Esq.	Hon. John Tho. Capel.

4. That the thanks of the Grand Jury be given to Dr. Tierney, of Brighton, for his plan delivered in for promoting Vaccine Inoculation.

5. That a subscription be entered into to defray the present expences, as well as for all other purposes intended to be promoted by this undertaking.

6. That the above resolutions be printed in the Lewes Journal, Portsmouth Telegraph, and two London Papers.

7. That John Drew, of Chichester, Esq.; Francis Whitfield, Esq. of Lewes; and Tilden Sampson, Esq. of Battle, be requested to receive subscriptions for the use of the institution.

ANSWER TO MR. GRIFFIN'S QUERIES ON VACCINATION,
FROM PHYSICIANS AND SURGEONS OF EDINBURGH,
PERTH, AND DUNDEE.

June 15, 1804.

We have received the following Communications from Dr. Walker, who has just obtained them from Mr. Griffin, passing through London last night on his way home from Scotland. The Rev. Gentleman, however, must pardon our bringing forward, in italics, what he, minister of peace, wished to be kept back for fear of any interruption of quiet and good neighbourhood. The Medical Council of the Royal Jennerian Society have voted him thanks for his pamphlet, and for his exertions to promote the diffusion of Vaccine Inoculation; and he must not conceal or curtail the valuable testimony of our northern neighbours. We understand, that if his stay had been longer in Edinburgh, he would have been favoured with the whole weight of that great school of physic in favour of the Jennerian discovery.

To the Rev. Mr. GRIFFIN.

SIR,

OUR friend, Dr. Charles Stuart, has transmitted to us a letter which he received from you a few days ago; and has requested us to answer the following queries which were contained in it, viz.

Query 1. How long has vaccine inoculation been practised in this city or neighbourhood?

Query 2. Whether any facts have occurred tending to render it doubtful, whether the vaccine inoculation be a permanent preventive of variolous infection?

Query 3. Whether any have been evidently exposed to the infection of small-pox who have been vaccinated more than three years?

Query 4. Whether it be not the opinion of the medical gentlemen of Edinburgh, that if vaccination be a preventive for one year, it will be a preventive for life?

Answer

Answer to Query 1. Vaccination was begun here in the year 1799, and became general the following year.

On the 18th of February, 1801, we began to inoculate at the public dispensary, and since that time have vaccinated above three thousand, besides many hundred children privately. There must also have been a very great number vaccinated by the other medical practitioners, as they have all heartily concurred in their endeavours to convince the lower ranks of the propriety of having their children vaccinated; and they have succeeded much beyond their expectations.

Answer to Query 2. We have met with no facts to render it doubtful whether vaccination be a permanent preventive of variolous infection. Nor have we ever heard from our brethren, or any others, of such facts occurring in this city or neighbourhood.

Answer to Query 3. We know of many children, vaccinated more than three years ago, who have of late been repeatedly exposed to the infection of small pox; among others, some of our own children, who were vaccinated five years ago, without having suffered from the variolous infection. Indeed, we hear daily of such instances from the mothers of the children who were vaccinated at the dispensary early in the year 1801. Besides, the small-pox have been so frequent here for many months past that innumerable instances of the kind must have occurred, had the preventive not been permanent.

Answer to Query 4. We think that it must not only be the opinion of the medical gentlemen of Edinburgh, but of every thinking man, that if vaccination be a preventive of variolous infection for a year, it must be a preventive for life. The contrary opinion appears to us to be very unphilosophical, and contrary to our ideas of physiology and pathology. *Therefore we humbly think that Mr. Goldson's pamphlet is founded on such false principles, that no part of it can do any harm, except the TITLE, and that only to weak or unthinking people.*

We have thus answered your queries as fully as our time will admit of; and, although we have done it in our own names, we believe that we have given you the sentiments of all the medical practitioners of Edinburgh and the neighbourhood.

Sincerely wishing you success in your labours in the vineyard of humanity; and entreating that you may freely apply to us if you think that we can, in any way, assist you

you in furthering the great work in which you are engaged,
We are, &c.

W^M. FARQUHARSON, M. D.
JAMES BRYCE,
A. GILLESPIE.

Surgeons to the Vaccine Institution at the Public
Dispensary of Edinburgh.

Edinburgh, June 9, 1804.

* * Mr. Alexander Wood, Surgeon, Dr. Gregory, Dr. Charles Stroud, and, through him, Dr. Monro, have expressed their concurrence in the above to Mr. Griffin; also Drs. Stuart, Kelly, and Wood, of Perth, with Dr. Willis of Dundee, who have inoculated thousands, beginning more than four years ago, and from the first to the last exposing those whom they vaccinated to variolous contagion.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

AN uncommon Case of Monstrosity in the fœtus of a woman having lately occurred, you may possibly think it not altogether unacceptable to your Readers. Inasmuch as it vindicates, in this instance, the veracity of an author who has been rather playful in his ideas upon the subject, the concurring testimony of a fact may be of some advantage.

The woman had twins near the seventh month of pregnancy. She was uncommonly large, and the flow of waters at birth immense.*

The first born child was perfect; the other wanted head, neck, arms, and chest. The ribs, upon dissection, were apparent, though minute, without any regular cavity of thorax.

As a similar case exists in Palfyn, and nothing more extraordinary happened at the time of labor, or previous to it, on that head I shall forbear troubling you with a more minute account.

Palfyn

* The fœtus was given to me by my friend here, Mr. Rowntree, who attended the labor.

Palfyn having given a description of the abdomen and pelvis, it induced me also to examine those parts; for it is instructing to observe how the powers of nature enable her to effect varieties, under circumstances and form apparently the same.

Upon the abdomen, above the navel, there was a kind of blind hole, which might have led to the supposition, that it was a passage communicating internally with vessels. Neither outward nor inward examination shewed any thing but an imperfect indentation.

Corresponding with the situation of the shoulders, there was on each side a considerable sac, which gave the feel of a viscus beneath; and from the extent of the cavity on the right side, it particularly appeared to include the liver. It also evidently contained a fluid, which was the cause of the projecting roundness. Upon opening these sacs, not any thing but a meconium-like fluid was contained.

The left cavity was somewhat intersected by small delicate ligamentary webs, interspersed with white filamentous bands, like flattened nerves.

The septum betwixt the two cavities was transparent and ligamentous, surrounded by membrane.

The abdomen, from the smallness of the fœtus, necessarily afforded very little space betwixt the parietes of the cavity and its contents.

The liver was the most conspicuous organ, extending over both sides, in two large distinct lobes, included within a very evident and beautiful sac.

Each larger lobe was distinguished by reticular lines, as in the conglomerate gland, without gall bladder.

From their uniting part arose the umbilical vessels, meeting as usual the urachus.

I could not perceive any stomach, spleen, or pancreas; nor discover any precise direction or mark of colon.

The intestines were very short and round, evidently terminating in the rectum, which was of natural conformation; the ileum was lying on each side the centre of the abdomen.

The funis, on quitting the navel, projected with a knot. After tracing the urachus, and the vessels from the liver to the funis, I opened the small pouch of the funis, which was attached to the navel. In it were contained several short convolutions of the ileum, with an evident caput coli, and an appendicula vermiformis.

This was a congenite umbilical hernia, which had almost eluded observation, having no trace of it before it was opened.

Somewhat

Somewhat lower than the natural situation of the kidneys, though not included cellular substance, were two very small glandular looking bodies of an oblong shape; a small white band or vessel traversed downwards from them towards the pelvis.

It being a female foetus, I sought for the uterus, &c.

There was not any uterus or bladder, nor the appendages of the uterus, unless the two preceding glands were ovaria, which they did not appear to be.

The external passage of the urethra was pervious to a small wire, being a cul de sac, or was lost as such in the cellular membrane superficially under the skin.

The vagina had the semblance of being closed, yet a probe passed readily; but it passed into the urachus in a continued and obvious way.

There was an abdomen bounded by a membranous diaphragm, without apertures or ligamentous structure.

Should any gentleman of a lively turn be disposed to amuse himself with M. Palfyn's recital of the original cause of the production of this, and of such like formations, he will find it in his *Traite des Monstres*.

Having myself, little genius for such enquiries, I solicit others to undertake them, with this request, however, that the public be indulged by facts before they exercise their talents upon the physiology. For, sometimes, I am apt to think, there are to be perceived little monstrosities as well of the mind as in the body.

“ Quo vobis mentes, rectæ quæ stare solebant
Antehac, clementi sese flexere viai? ”

I am, &c.

York, June 11, 1804.

JAMES ATKINSON.

*CASE of FRACTURE of the OCCIPITAL BONE with the Loss
of a PORTION of the CEREBELLUM, terminating favorably.
By J. EVANS, of Ketley, Shropshire.*

ON the 2d of December, 1803, I was sent for to John Johnson, aged 27 years, servant to Joseph Reynolds, Esq. of this place, who half an hour before had received a kick upon the posterior part of his head, from a large waggon horse in his master's stable. On my arrival I discovered a wound in the scalp, about an inch and a half in length, filled with brain. Upon examination I could plainly feel a part of the skull considerably depressed near the attachment

16 *Mr. Evans's Case of Fracture of the Occipital Bone.*

ment of the Trapezius muscle. The man had lost some ounces of blood on the spot where the accident happened, but the hæmorrhage had ceased when I saw him. I found him tolerably rational, but slow in answering questions; his pulse feeble and irregular. I directed a bread and milk poultice to be applied to the injured part, and an opiate to be given him in the evening, which his stomach rejected. He passed that night without much pain. The following morning the portion of brain which lay in the wound (being the size of a small walnut) came away with the poultice. Apprehending fatal consequences were likely to ensue from so severe an injury, I requested to have a consultation with Mr. Yonge, of Shiffnal, a gentleman highly respected for his professional abilities. We were unanimous in our opinion, that while the man remained free from symptoms of oppression, it would be most prudent to leave the business to nature, without attempting to elevate the bone. His bowels were kept in a proper state by small doses of castor oil, and the pain of his head (which was sometimes violent) was occasionally alleviated by opiates. Dry lint and a bread and milk poultice were the applications to the wound during the suppurative process; when the discharge became less, lint covered with a thin piece of sponge were the only dressings made use of. On the tenth day from the accident the patient had a considerable hæmorrhage from his nose, which seemed of service to him in relieving an excruciating pain in his head, which he at that time complained of. At the expiration of five weeks his usual faculties and spirits were quite restored. Previous to that period he said his sight had been very imperfect, although he never complained of it, and was extremely low from the danger he apprehended himself to be in. During his confinement, his diet consisted chiefly of milk, broth, and tea, according to his inclination. Being naturally a sober man, he would not suffer his attendants to give him any thing that was heating. On the 20th of February, he was well enough to return to his usual employ, but his wound was not healed of some weeks after. The depressed portion of the os occipitis was near the *third* of an inch below its natural level; being not wholly detached, no exfoliation took place. Is it not probable, that the portion of brain forced out of the skull made a sufficient space for the depressed bone to lodge in, without causing those alarming symptoms which generally attend such injuries? The depression is now so large as to admit the end of a moderate sized thumb.

June 12, 1804.

OBSERVATIONS .

OBSERVATIONS ON THE SEVERE DYSENTERY, *as it existed on board the Lord Duncan East Indiaman during a Voyage to Bengal, in 1802—4. In a Letter to JOHN HUNTER, M. D. F. R. S. Physician to the Hon. East India Company.* By JAMES ATKINSON.

(Continued from Vol. xi. pp. 503—518.)

CASE II. Mr. W——, passenger, of a rigid fibre, had been much exposed to the sun in an open boat, and afterwards to heavy showers of rain. On the 18th of October, when I first saw him, he had laboured under a low fever three or four days, but with no distinct remissions. He is of a melancholy disposition, and is subject to fits of insanity. He had taken an emetic the first thing, then the bark, which with difficulty was retained, though assisted by opium. For two days the stomach was very irritable. I found him with brown furred tongue and lips, cold skin, and great despondency. His pulse was weak and about 120. Prescribed draughts of camphor, tinct. opii gtt. xv. and tinct. cinchonæ ʒiij. to be taken every four hours, and wine lbij. per diem.

19th. The pulse more full and regular, with a soft skin. He is continually changing posture, and is very low spirited.

20th. The tongue not so black, but still foul. Feels no particular pain. Very obstinate, and often refuses his medicine. Pulse regular. I now find that he has had frequent stools, scanty and bloody, since yesterday, with tenesmus: He does not appear feverish in the smallest degree, but has a cold and dry skin. Former medicine discontinued. R. Ant. tartariz. gr. j. calomel. gr. iij. ext. opii, gr. ß. ft. pil. to be taken every three hours.

21st. Tongue still foul. Took the pills regularly, from which he found great relief. Skin soft and moist. In the night he called for his medicine, and slept soundly at intervals. He has not passed any blood since yesterday evening, but his stools are still slimy, and attended with tenesmus. Complains that his gums are a little sore.*

22d. Dysentery easier. Tongue whitish, but perfectly clean round the edges. In good spirits; gentle perspira-

* Whenever the gums become slightly affected, the disease almost invariably abates, and the calomel is immediately withdrawn. Medicine and food to invigorate the system are still continued.

tion. Omit the pills during the night, and take an anodyne at bed time.

23d. Purging and tenesmus gone. Omit calomel and take a full diet. An anodyne at night.

24th. Recovering strength fast. Dismissed.

CASE III. When at Madras, Miss Jeffreys, a delicate girl, aged six years, seemed to be attacked with that modification of the dysentery, which medical writers have called *fluxus celiacus*. The stools were of a perfectly white transparent mucus. Her appetite was squeamish, had feverish symptoms and a very distressing tenesmus. The calomel and opium pills with nourishing condiments were given for ten days, and the disease disappeared. Eight other children lived in the same cabin, none of whom had the complaint.

CASE IV. As an evidence of the efficacy of mercury in chronic dysentery, I shall relate the following case of Mary Armstrong, aged 20. During her pregnancy at the Cape of Good Hope, she had been attacked with remittent fever and the dysentery, most probably induced by a debilitated system, when under the operation of mercury for lues venerea. She was harassed by this combination of diseases at the time that the child was born. She did not make any application till a month after she came on board. Her complaints were then, repeated purging of mucus and blood, slight febrile symptoms, and debility. The child, worn out by the same distemper, died when about six months old, in extreme misery. The pills of calomel and opium were immediately prescribed for the mother, and good diet and port wine liberally allowed. The next day the purging and tenesmus very little abated, and she was excessively languid. The medicines continued. From this time to the eighteenth day, March 20, the purging and griping gradually diminished; and as her mouth and throat were slightly affected by the calomel, a pill consisting of extract opii, gr. jß. cerus. acet. gr. j. pulv. zinizber, gr. iij. was ordered to be taken, and repeated twice a day. The medicines were continued till the 24th, when becoming free from every troublesome symptom, she was dismissed, and had no relapse during the remainder of the passage.

CASE V. Samuel Rosey, aged 17. When first attacked with the dysentery, on the 11th of June, at Diamond Harbour,

bour, he passed about thirty evacuations a day, of a mucous and purulent kind, with great pain and tenesmus. Calomel was administered; but the next day he went to Calcutta, and did not return till the 19th, during which time he had had frequent stools with ascarides and violent gripings and tenesmus. Calomel c. opio.

21st. Appetite bad; countenance sallow; purging and other symptoms as yesterday.

22d. The same, with acute pain in the left hypochondrium, and weak pulse. Sago and wine.

23d. Pains of the side and purging abated.

24th. Has had but two or three evacuations the last twelve hours. Mouth affected. Has very distressing griping pains. Take a draught with tinct. opii et sp. vol. c. c. aa. *gtt.* L. twice a day, and omit the calomel.

25th. No complaint.

A detail of cases exactly similar would be tedious and uninteresting, otherwise fifty might be given, which yielded to calomel and opium alone. Those treated by other medicines were lingering and obstinate. And though experience proves the superior efficacy of mercury in this disease to a demonstration, cases will occur where it cannot be administered so extensively as could be wished. In those of the chronic form, attended with universal agonizing pains and great emaciation, the almost exclusive use of opium becomes indispensable. Of this description is the following of fatal termination.

CASE VI. T. Phillips, aged 22, of the 54th regiment, had, just before he came on board, laboured under fever and the dysentery. He was highly debilitated, and the crowded ship, combined with very bad weather, increased the violence of his malady. From the commencement he had that dejection and expression of countenance, described by Hippocrates, and from the 2d of March to the 19th, he continued painfully wasting away with very transient intervals of ease. The dose of opium had been gradually increased; but as a circumstantial detail would be unimportant, the annexed statement from the 19th to his death may be sufficient.

20th. Has a hoarse cough, and spits much. The eyes sunk; he is blind of the left, and can see but indistinctly with the right eye. Sallow countenance, and has a hectic glow on his cheeks. Teeth and lips covered with an incrustation of black matter. Pulse very feeble. Takes a

grain and a half of opium every three hours. Wine and sago ad libitum.

21st. Pulse scarcely perceptible. Purging almost constant. Has taken nothing but a little wine all day.

22d. In the same hopeless state as yesterday. An anodyne at night.

23d. Last night about twelve he was seized with severe pains and griping. Has vomited a quantity of bilious matter, and has recovered in some measure the sight of the left eye. Towards evening he has had universal pains; purging very frequent and bloody. Take two grains of opium every three hours.

24th. Pulse full and rather quick. In very little pain, and drinks plentifully of wine. Has had only three stools to day. Continue the medicine.

25th. Feels a numbness all over him and a deathly sensation about the heart. Purging seldom, and the pulse rather feeble. Expectorates a frothy mucus.

26th and 27th. Much the same as on the preceding day, except the addition of singultus.

28th. Pulse pretty full; spits a viscid mucus. Has a ghastly appearance, and is wasted almost to a skeleton. The liberal use of port wine has had a good effect in keeping the spirits and pulse from sinking. On the 21st, 22d, and 23d, when he could not take the usual quantity of opium and but little wine, the consequences proved the absolute necessity of their administration.

29th. Last night, about ten o'clock, he was attacked with constant purging. He seemed nearly suffocated by the mucus in his throat, and this morning his head and bowels are much affected. In the evening he expired.

I had imagined whenever the disease put on such a dreadful appearance, that no advantage could be possibly derived from medicine; but W. Raffarty, another chronic patient, labouring under symptoms equally formidable at the same time, recovered by exactly the same treatment. With the dysuria he had a complete phimosis,* which disappeared as the original disease wore off. The tormina of the bowels was, if possible, more exquisite than in the case of

* The phimosis occurred when the throat was very much affected. Could this arise from sympathy or associated motions between the fauces and genitals, as in parotitis, hydrophobia, hanging? It is certain that there was no venereal infection whatever, and perhaps any morbid action in the pelvis could not have induced such a symptom.

of Phillips, and the evacuations of blood much more considerable.

CASE VII. Joseph Henricks, poulterer, aged 20, was just recovering from fever and the dysentery when he went to Calcutta, and there, from drinking excessively of Bengal rum undiluted, and exposing himself during intoxication to the alternate influence of atmospheric heat and moisture, the disease returned with redoubled violence. From the 30th of July to the 4th of August, he had considerable purging, nausea, tenesmus, and loathing of food. On the 5th he was much reduced. His complexion was sallow and cadaverous; the pupils contracted to a point; his pulse quick; and had excessive thirst. Take four grains of calomel three times a day, and wine and congee for common drink.

6th. Had an anodyne last night with tinct. opii gtt. xl. The pupils more dilated; the purging diminished, but still mucous and purulent. Great pain in the pelvis and bladder, with dysuria. Towards the evening the tenesmus was excruciatingly severe, and nothing voided but a white slimy material. Pulse weak and his spirits sunk. Had an oleaginous aromatic draught, but it was instantly rejected. Ordered forty drops of laudanum to be taken every six hours.

7th. Every way better this morning. Had but two or three stools last night. Has taken some tea and he seems refreshed. Pain of the bowels returned. Apply to the abdomen a volatile liniment with tincture of opium. In the afternoon the evacuations consisted of mucus mixed with blood. Latterly no food or medicine has remained on the stomach. Repeat the draught, and add to each, ol. menthæ ppt. gtt. vj.

8th. Stools are again nothing but mucus. Pupil still contracted, and the pulse small. Debility of the stomach continues. To have a blister over the region of the stomach. Immerse the feet and legs in warm water twice a day, and take two grains of calomel every four hours. Has complete loathing of food, wavering and confusion of head.

9th. Blister rose well. Pulse quick and more full. Pupils more dilated. Is now perfectly collected. Purging the same, but with much less pain. With each dose of calomel take fifteen drops of laudanum.

10th. Pulse very weak. Continual purging in the night, but with less pain than usual. Refuses all kind of food and nourishment. Great despondency. Take tinct. opii

gtt. lx. in wine, and if retained, to be repeated every six hours. In the night he had cold and clammy perspiration; feeble pulse; purging nothing less. Add to each draught elixir vitriol gtt. v.

11th. The pulse still small, and the purging greatly diminished. Has a little appetite and is free from pain. Passes very little urine.

12th. Yesterday the purging was trifling, but increased in the night; almost every motion of the body or change of posture producing an inclination to go to stool. This morning he is much emaciated. His countenance is meagre and sallow, pupil contracted, and very weak pulse. Vibices appear on the breast. Stomach still irritable. Had an anodyne aromatic draught, which was vomited up a few minutes after it was taken. Has a ghastly aspect. Pupils more contracted, and the pulse hardly perceptible. Obstinate refuses nourishment. About a pint of coagulated blood was passed at one stool. He is very restless. Take half a drachm of the bark, and five drops of laudanum. All the day he has passed by stool the same bloody material. Has great confusion of intellect. Repeat the bark every two hours.

15th. Pulse very feeble. Pupil dilated more than in health. Frequent stools of clotted blood. In the middle of the day the purging diminished. Spits a good deal and sometimes blood. Absolutely refuses both medicine and food. At nine P. M. he died without the least symptom of pain.

APPEARANCES ON DISSECTION.

I opened the body ten hours after death. The vesicula fellis was much larger than usual, and distended with bile, which had strongly tinged the peritoneum, stomach and colon. On evacuating the gall bladder, I found the ductus communis choledochus almost impervious. It had in all probability become paralytic from the excessive stimulus of burning spirits he had so imprudently swallowed. There was no appearance of bile where the duct enters the duodenum. The liver was of a brownish leaden colour, very firm, and of the natural size. On making an incision along the small intestines, the glandulous coat was eroded in many parts, and covered with a viscid dark coloured slime. The colon was considerably ulcerated, and studded with livid purple spots. The rectum* was thickened and ulcerated

* See the drawing.

ated more than the colon, and contracted to half its diameter. Cutting into the fat between the bladder and rectum, there appeared intersections of membranous filaments loaded with hydatid-like vesicles, from which rushed out a transparent fluid. The bladder contained about two ounces of muddy urine. The prostate gland was enlarged, and the urethra, towards the neck of the bladder, much contracted. The stomach had nothing in it but a little brownish coloured fluid, and the mucous membrane was much abraded. The whole intestinal tube was empty of every thing but wind. The other viscera had no marks of disease.

You will observe, Sir, that I have here, contrary to general practice, placed the fatal cases in the most conspicuous point of view; and though they furnish little argument against the above mentioned treatment, they illustrate sufficiently the deadly tendency of the disease. As all theory is supported by a general collection of inferences, legitimately drawn from facts, that must be the most correct and comprehensive which can be applied to the greatest number of cases. For however humiliating it may appear to medical men, our brightest prospects will be often overcast, and the most approved means of cure will be occasionally ineffectual. Then we may truly say with the sententious Euripides, *Τὸ βροτὸς φρονὺ λίγην*. No medicine was ever discovered to be uniformly successful in any complaint, and it would be idle and presumptuous to recommend one possessing these qualities in the dysentery. Those who, with self complacency, publish to the world the invariable success of particular practice, must conscientiously know what numbers are dying in secret, and must certainly feel, in desperate cases, the inutility of all human exertion.

The method of treatment here pointed out, rests upon the solid basis of experience, unaided by the seducing embellishments of hypothetical reasoning. The indulgence of imagination in the construction of theories, has certainly very considerably impeded the progress of practical science; for admitting the ingenuity and originality of those theories, they have only flourished to be forgotten; and the most illustrious speculative physicians on record, have left very little behind them of essential benefit to mankind.

APPENDIX.

For the particulars of the following dissection I am indebted to Mr. Ashton, an ingenious surgeon in the honorable

ble Company's service, to whom the method of treatment above recommended was suggested, and which he has found peculiarly advantageous. The subject of the dissection was a soldier on his passage from India, aged 35, of an impaired constitution and meagre aspect. He had suffered severely from syphilis, and had a bony tumour on each tibia. He was invalided for what he called "the pains in his bones." He died of the severe dysentery.

*Dissection, Six Hours after Death, February 14, 1804,
at St. Helena.*

On opening the abdomen by the common crucial incision, the omentum appeared nearly obliterated, and what remained was deprived of its adipose substance.* The jejunum and ileum were in a high state of inflammation,† and looked as if their vessels were distended by a minute injection, but there was no adhesion of parts; their internal surface was very much diseased and gangrenous, not even the size of a sixpence being free from ulceration. The muscular coat was considerably discoloured. The duodenum had no external inflammation, but internally it was much the same as the jejunum and ileum.

The affection of the colon about the sigmoid flexure was similar to the small intestines; the villous coat was soft, and easily separated by a slight touch. Between the rectum and the transverse arch, there were several contractions,‡ some of them so small as only to admit the passage of the little finger. Above them were some black fæces but not hard or scyballous. The rectum being slit up, also exhibited a more

* He complained during his illness of cutting pains under the umbilicus.

† If this was inflammation, to what range or class of diseases must it be referred? Is it to be cured by the antiphlogistic regimen? Inflammations arise from abundance of blood; but is it inconsistent with all medical facts to conjecture, that they may also arise from a penury of blood? This man was emaciated and infirm to the last degree, and still the dissection proves that the intestines were inflamed, "as if their vessels were distended by a minute injection." In this diffused redness there is something essentially different from common inflammation, or such as depends upon sthenic diathesis. Pain arises from diminished as well as increased action; and as I think no physician would employ the remedies usual in inflammations under the circumstances of the above case, and as invigorating the system must be the true indication of cure, there can be little doubt that the two inflammations depend upon very opposite causes. Perhaps it is the peculiarity of asthenic inflammation to terminate in gangrene.

‡ This contraction is a consequence and not a cause of the disease, as Dr. Cullen imagined.

a more diseased appearance, ulceration having nearly penetrated through the coats. The mesentery was highly inflamed, and some of its glands increased to the size of a large almond, hard but not schirrous. The stomach contained about half a pint of a brown frothy fluid, and surrounding the pylorus; it was in a state similar to the duodenum. The liver was of a brown stony colour, soft and rotten, separating between the fingers. The gall bladder* was much distended, and contained at least seven ounces of very black, thick, ropy bile. The pancreas was much smaller and harder than natural. The spleen and kidneys seemingly as in health. There was no preternatural appearance in the thorax; only the heart was very lean, small, and firmly contracted.

London, May 1, 1804.

PRACTICAL OBSERVATIONS ON THE TREATMENT OF THE
SCARLET FEVER AND SORE THROAT.

HAVING lately read several publications on the scarlet fever and sore throat, in which are recommended remedies agreeable to the prevailing theories and speculative opinions of the day; I beg leave to lay before your readers a practice in that disease I have, for upwards of thirty years, invariably followed with eminent success.

It is well known that many pass very safely through the scarlet fever in its mild state with little or no medical assistance. But when in that state, medicines are administered, I fear the cure is, by the ingenious theoretical practitioner, ascribed too often to their effects and not to the mildness of the disease; especially if some fashionable medicine has been prescribed; hence remedies undeservedly creep into practice, and, I fear, in serious cases, frequently supersede the use of those which have long stood the test of sound practical experience.

I pretend not to account for the source or origin of the scarlet fever and sore throat, but am well satisfied that the fomes morbi of the disease, however generated, lurk in the bowels. Under this conviction, I strictly enjoin them to
be

* These appearances of the liver and gall-bladder illustrate an opinion advanced in the former part of this work. No mention is made of the state of the vesica urinaria. Parts of the diseased viscera were shewn me a few hours after dissection.

be well cleared in whatever stage or however violent the disease may be, when I first see the patient, if I suspect that such necessary treatment has not been before observed. The very foetid smell of the evacuation, and the relief such evacuation invariably procures, strongly prove to me the necessity of purgatives; and I may add, from reiterated observations, that the longer they are delayed the more severe proves the disease. Many practitioners, alarmed at apparent debility, are deterred from exhibiting brisk cathartics, lest their operation should irrecoverably sink the patient. Such apprehensions would be justly founded if purgatives were administered without due discriminating attention to the age, constitution, and immediate state of the patient. But where such attention is paid, I have never seen any mischief to arise; on the contrary, the most salutary effects have taken place, merely from the bowels being relieved from the contained accumulated foetid faeces, and hence every febrile symptom becomes milder, and the vital powers invigorated not debilitated. In the commencement of the disease, I generally prescribe preparations of senna, with or without, as circumstances indicate, the magnesia vitriol.; to these I add, in robust constitutions or even in weakly habits, if pains in the head or sickness in the stomach be urgent, a due proportion of antim. tart. By these means I effect a thorough clearance of the stomach and intestines; when that is accomplished I endeavour to bring on a moderate perspiration by a liberal use of the aq. amm. acet. to which I sometimes add the vin. antim. and sometimes the conf. damoc. I generally direct the feet to be immersed in warm water with one-eighth part of vinegar. This pediluvium I find to be a pleasant and effectual assistant in promoting perspiration and inducing sleep. A pursuance of this plan, interposing at intervals cathartics as occasion may require, will in a few days carry off the first febrile symptoms. The remaining debility becomes then the object of attention. To remove this, light preparations of bark, with a suitable diet, I find most effectual remedies.

The early exhibition of the bark, wine, &c. &c. in the scarlet fever and sore throat, I am persuaded has been, and continues to be, productive of very serious mischief. To such practice, I partly ascribe in many instances the severity, if not the mortality of the disease. Lassitude, prostration of strength, general pains in the limbs, quick pulse, parched skin with an appearing efflorescence, soreness of throat, with enlarged and ulcerated tonsils, denote the
com-

commenced disease. The practitioner, dreading the rapid progress of the angina maligna in debility and fatal putrefaction, immediately begins to prevent the devastation by plentifully throwing in bark, wine, and other cordials, preparing (or perhaps not) the bowels for their reception by a mild aperient or gentle enema; hence, the very remedies administered with the idea of invigorating the system to resist the much dreaded debility and putrefactive process, become, by retaining the putrid colluvies in the bowels, and irritating the general system, active agents in promoting the very evils they were intended to avert.

The vitriolic acid diluted with aq. dis. to which I add a sufficient quantity of syr. papav. errat. forms a gargle pleasant to the eye and taste. With this gargle I strenuously recommend the tonsils, fauces, and mouth to be kept clean, and that it should be used always immediately before nourishment is taken down.

I very rarely make use of any other external application, being long doubtful whether blisters, by the pain and trouble they occasion, compensate for their *supposed* good effect.

It often happens, that in children the gargle cannot be used, and the sloughs and foul mucus will accumulate to a very alarming degree. In such cases I have relieved the little patients from the stupor and suffocation, under which they appeared dying, by emetics, and have, by their timely use in some children, prevented the accumulation from taking place.

May 21, 1804.

MEDICUS.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

IT has frequently occurred to me, that your excellent Journal may be still more enriched with useful information, and that without any deviation from the plan you have so successfully adopted. It is but too well known to practitioners, that there are some diseases which, though not considered incurable, are yet extremely fatal, and from the rare instances of recovery, it may be inferred that neither their nature, nor proper mode of treatment, has yet been ascertained; at least, it would be impossible to
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shew that further advancement towards a cure might not be discovered. To collect into one point of view the experience and observations of those whose situations have given them frequent opportunities of attending to such diseases, would be a most desirable object.

No publication is better adapted for the conveyance of such communication to the public than the Medical Journal.

If this proposition meets your approbation, and that of your numerous correspondents, I would take the liberty of proposing, as the first subject of enquiry, Puerperal Fever, a disease fatal in the extreme, and not till lately much attended to. For myself, I can only say, that I have had frequent opportunities of observing it, and have known all the remedies which have been recommended, tried, but without success. Some of them even appeared to hasten the fatal catastrophe.

A case lately came under my care in which the alkalies, so much boasted of on the Continent, had a complete trial, without producing any change on the disease, and the patient died the ninth day.

I am, &c.

May 25, 1804.

II.

Catalogue of such British Plants as have been found in any Shape serviceable to Man, whether in a medicinal, æconomical, culinary, or agricultural Point of View, together with an Account of the Uses which they have been made to answer, and an accurate Botanical Description of each Plant.

[Continued from Vol. xi. pp. 526—534.]

8. RUBIA. *R. tinctorum*.—*R. peregrina*. *R. Sylvestris aspera*. *R. T. Anglica*.

Ang. Madder, Dyer's madder, Wild madder.

Gen. Desc. Bloss. 1-petal; bell shaped; berry 2-seeded.

Spec. Desc. *Leaves* annual; *stem* prickly, 4-cornered, climbing. *Bloss.* dirty yellow. The *variety* of this plant, which is a native of England, having the *blossom* 5 div., *leaves* smooth, shining, deciduous, differs in several respects from any of the Linnean species. See *Withering Bot. Arr. Hedges in Devonshire; Isle of Wight, &c.* Bloss. June, July.

Use. Madder has been considered as diuretic, (which is denied

denied by Dr. Cullen) *deobstruent*, and *detergent*, and is chiefly used in the *jaundice* (on the authority of Sydenham), *dropsy* and other diseases supposed to proceed from *visceral obstructions*, particularly those of the liver and kidneys; some modern authors have recommended it as an *emmenagogue* (Home, Clinical Exp.) and in *rickety* affections (Levret) which appears surprising, as brute animals, to which it was given, especially the younger, suffered considerable emaciation and prostration of strength from its effects. Dr. Home gave it as an emmenagogue, from a scruple to half a drachm of the powder, or two ounces of the decoction, three or four times a day. Dr. Cullen says, that "after several ineffectual trials, practitioners have entirely deserted its use." It has the peculiar property of tinging with a florid red colour, the milk, urine, cutaneous excretion, and even the bones of animals that have fed upon it; the bones are quickly affected, and the colouring matter extends through the whole osseous substance, so that if this root be intermitted and employed at proper intervals, the bones are found to be coloured in a correspondent number of concentric circles. Though the cultivation of madder in Britain seems to promise much advantage both to the planter and the nation, yet the great quantities of those roots used by the British dyers and callico-printers, has been for many years almost wholly the growth and export of Holland. But lately, by the laudable exertions of the *Soc. for the Encouragement of Arts, &c.* considerable quantities of English madder have been produced, and found as good at least, if not better than any imported. See *Transac.* v. 1, p. 10.—*Woodville*. For a full account of the cultivation of madder, see *Miller's Dict. in artic.*

9. PLANTAGO. *P. Major*; *P. vulgaris*; *P. latifolia-vulgaris*.

Ang. Way-bread, Common great plantain.

Gen. Desc. Bloss. 4-cleft, permanent, border broken back. cal. 4-cleft; stam. extremely long; caps. 2-celled, cut round, superior.

Spec. Desc. *Leaves* egg-shaped, smooth with 7 or 9 ribs. *Stalk* cylindrical, nearly 2-edged, 9 to 18 inches high. *Spike* tiled with florets, rather rough with short hairs. *Road sides, very common.* Bloss. June, August.

Use. This plant, though omitted in the London, is retained in the Edinburgh Pharmacopœia, in which the leaves are mentioned as the pharmaceutical part of the plant:

plant: their qualities are said to be *refrigerant, attenuating, substyptic, and diuretic*. It was formerly reckoned amongst the most efficacious of vulnerary herbs, and by the peasants the green leaves are now commonly applied to cuts and other fresh wounds, and cutaneous sores; sometimes made into an ointment. Inwardly, they have been used in phthisical complaints, spitting of blood, and in various fluxes, both alvine and hæmorrhagic. The *seeds*, however, seem better adapted to relieve pulmonary diseases than the leaves, as they are extremely mucilaginous. The *roots* have been recommended for the cure of *tertian intermittents*; and, from the experience of Bergius, not undeservedly. An oz. or two of the expressed juice, or of a strong infusion of plantain, may be given for a dose; in agues, double that quantity, taken at the commencement of the fit.—*Woodville*. Plantain has been alleged to be a cure for the bite of a rattle snake, probably with little foundation, though it is one of the principal ingredients in the remedy of the Negro Cæsar, for which he was rewarded by the Assembly of S. Carolina.—*Duncan's New Edinb. Dispens.* Sheep, goats and swine eat it; horses and cows refuse it.

10. CORNUS. *C. Sanguinea*; *C. femina*.

Ang. Dogberry tree. Hounds tree. Hounds berry. Prickwood. Prick timber. Gatten tree. Female Dogwood. Femalcornel.

Gen. Desc. Involucrum generally 4-leaved; petals 4, superior; drupa succulent, beneath, 2-celled, hard, solitary.

Spec. Desc. *Stem* 4 or 5 feet high, dark brown. *Branches* straight; shoots red; *leaves* egg-spear shaped with strong nerves, green on both sides; *tuft of flowers* flattened, in 5 divisions, these subdivided; *flowers* white. *Hedges and woods*. *Bloss.* June.

Use. The berries of this tree have a styptic quality, and are bitter to the taste. They serve also to dye purple. The wood is white and very hard and smooth, fit for the purposes of the turner. The leaves change to a blood red in autumn. Horses, sheep and goats eat it; cows and swine refuse it.

11. PARIETARIA. *P. officinalis*. *P. vulgaris*. *P. Dioscoridis*.

Ang. Pellitory of the Wall.

Gen. Desc. Female florets mixed with hermaphrodite
on

on the same branch; calyx 4-cleft; bloss. o; seed, 1, superior, lengthening.

Spec. Desc. Leaves spear-egg-shaped; fruit-stalks forked; stems reddish; cup 2-leaved; bloss. greenish white; anthers, if touched when ripe with a pin, burst, and emit their pollen with some considerable force; sometimes fly from the calyx—*Light.* Old walls, rubbish, v. com. Bloss. May—September

Use. This plant was formerly in repute as a medicine; but it does not seem to possess any remarkable qualities: it was accounted an *emollient*, though apparently without reason; and as a *diuretic* its character is better known; its expressed juice, sweetened with sugar, is said to have had a powerful effect in that way; and a decoction of this plant and *uva ursi* has been found of use in clearing the urinary passages. It is now, however, very seldom used, though retained in both Pharmacopeias.—*Woodville.* *The leaves of this plant strewed in granaries are said to destroy the corn-weevil.—*Lightfoot.* It contains so great a quantity of nitre, that in making an extract from it, the mass has taken fire. *Ditto, and Withering.*

12. URTICA. *U. dioica.* (*U. Urens*, improperly.)

Ang. Nettle, common nettle.

Gen. Desc. Flowers, male and female apart; calyx 4-leaved; bloss. o. Male, nectary in the centre, glass-shaped. Fem. cal. 2 opposite leaflets very small. Summit hairy. Seed 1, egg-shaped, shining. Bloss. o.

Spec. Desc. M. and Fem. flowers on distinct plants; leaves opposite, heart-shaped; bunches in pairs. *Ditch banks, rubbish, v. comm.* Bloss. July.

Use. As a *styptic* this plant was formerly much used, and various hæmorrhagic affections have been mentioned, in which it has been successfully employed. It is said also to manifest a *diuretic* character, and to be useful in calculous complaints, scurvy, gout, jaundice, &c.; but it is now disregarded in medicine, and considered merely as an oleraceous plant, being found, when young, a good substitute for greens and other pot herbs.—*Woodville.* The young shoots in spring are boiled and eaten by the country people instead of cabbage greens.—*Lightfoot.* It was formerly used as an *astringent*, and was considered of service in all kinds of hæmorrhagies, but is now disregarded. A leaf

* Three ounces of the juice taken internally, or as an external fomentation, have been found useful in the strangury.

leaf put upon the tongue and pressed against the roof of the mouth, is pretty efficacious in stopping a *bleeding at the nose*. In paralytic limbs, and other cases of torpor or lethargy, the fresh leaves have been used in the way of a rubificent, producing considerable irritation and inflammation, (a practice termed *urtication*) and have been found of advantage in restoring excitement.—*Woodville*. The young shoots are gathered early in spring to boil with broth or gruel. The stalks may be dressed like flax or hemp for making cloth, paper, ropes, nets, &c. (a practice not uncommon in some parts of Russia and Siberia. *Falk.*) The leaves are cut to pieces to mix with the food of young turkeys, and other poultry; and, when a little withered, are eaten by cows.—*Withering*. It is said to be poisonous to frogs, for if a plant be thrown into a vessel where these animals are confined, they soon begin to swell, and in a few days perish.—*Woodville*. In Arran and other islands of Scotland, a rennet is made of a strong decoction of nettles, which, with a quart of salt to three pints, is bottled for use: and of this liquor a common spoonful will coagulate a large bowl of milk very readily and agreeably. The root boiled with alum will dye yarn of a yellow colour.—*Lightfoot*. The stings are very curious microscopic objects; they consist of an exceedingly fine-pointed tapering hollow substance, with a perforation at the point and a bag at the base. When the sting is pressed upon, it readily punctures the skin, and the same pressure forces up from the bag an acrimonious fluid, which instantly enters the wound and excites a burning inflammation, known to the experience of most people. *Hooke Discov. by Micros.* Cows, horses, sheep, goats and swine refuse the leaves; asses are fond of them, and cows will eat them in hay.

13. VISCUM. *V. album*.

Ang. Misseltoe. *Missel.* White Misseltoe.

Gen. Desc. M. and Fem. flowers on different plants; bloss. o. M. cal. 4-div.; filaments, o; anthers fixed to the calyx. F. cal. 4 leaves, superior; style, o; berry, pulpy, 1-celled, 1-seeded. Seed, heart shaped.

Spec. Desc. Leaves spear-shaped, blunt. Stem forked. Spike axillary. Flowers greenish white. Berries white. The root insinuating its fibres into the woody substance of the tree on which it grows; a singular parasitical ever-green shrub. On Apple trees chiefly; on many species of forest trees; rarely on oak; in Worcestershire and Herefordshire

fordshire very common, rare in the Northern countries; in Ireland unknown. Bloss. May.

Use. The *Viscus quernus* had formerly great reputation for the cure of *Epilepsy*; and a case of that disease in which it proved remarkably successful, is mentioned by Boyle, *Usefulness of Nat. and Exp. Phil.* 174. It was some years afterwards strongly recommended in various *convulsive* disorders by Colbach, who has related several instances of its good effects: *Diss. concerning Misseltoc, &c.* He administered it in substance in doses of $\frac{1}{2}$ drachm or 1 drachm of the wood or leaves; or an infusion of an ounce. This author was followed by others, who have borne testimony to its efficacy, not only in convulsive affections, but also in those complaints denominated *nervous*, in which it is supposed to act as a *tonic*. It has fallen however into general neglect, though it seems to be a remedy well deserving of notice.—*Woodville*. This plant was formerly in great repute as a remedy for *epileptic* and other complaints, but it is now much disregarded. From its berries and bark, bird-lime may be made. The berries are eaten by the Misseltoc-bird, the thrush, &c. and passing through them unchanged, adhere with their excrements to the branches of trees, where they vegetate, being washed by the rain to the underside of the branch, from which invariably their root springs. No art has yet made this plant take root in the earth: but the berries, when fully ripe, will adhere closely, if rubbed on the smooth bark of almost any tree, and produce plants the following winter. Sheep will eat greedily of this plant, and it is said to preserve them from the rot: in hard weather, it is often cut off the trees for them.—*Withering*.

14. HIPPOPHAE. *II. rhamnoides*.

Ang. Sea buckthorn. Common sawlow-thorn.

Gen. Desc. M. and F. flowers on different plants. Bloss. o. M. cal. 1-leaf, 2-lobed. Fem. cal. 1 leaf, tubular-berry, superior, 1-celled. Seed, hard, shining.

Spec. Desc. *Leaves* strap-spear-shaped, very entire, green above, scaled, white underneath, mid-ribbery prominent. *Flowers* solitary, appear before the leaves. *M. fl.* below the leaf, between a branch and a bud; *Fem. fl.* in the bosom of the lowermost leaves, sitting. *Stem* 8 feet high; *branches* spreading straight, stiff, thorny at the ends. *Sea shore in sand.* Bloss. March—May.

Use. Of the berries, which are very acid with an austere vinous taste, the fishermen of the gulph of Bothnia (No. 65.)

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prepare

prepare a rob, that added to fresh fish, imparts a very grateful flavor. In sunny sandy situations, it is planted for hedges. *Linnè*. Horses, sheep and goats eat it; cows refuse it.

15. *ALCHEMILLA*. *A. vulgaris*.

Ang. Common Lady's mantle. Bear's-foot.

Gen. Desc. Cal. 8-cleft; bloss. o; seed 1 or 2, inclosed by the calyx.

Spec. Desc. Leaves gashed, generally seven-lobed, serrated; a rib from the leaf-stalk along the middle of each lobe; flowers yellowish green, forming a kind of umbel, the general involucre entirely, the partial only half-way surrounding the stalk. Meadows and pastures. Blossom June—September.

Use. This whole plant is *astringent*. In the province of Smolandia in Gothland, a tincture is made of the leaves, which is given in spasmodic or convulsive diseases. —*Withering*. Horses, sheep, and goats eat it; cows are not fond of it; swine refuse it.

Tetrandria. Digynia.

16. *BETULA*. *B. alba*.

Ang. Birch tree. Birk.

Gen. Desc. Male and female flower separate, on the same plant; calyx one-leaf, three or five-cleft, blossom four-div. male cal. three-flowered; fem. cal. two-flowered. Seeds 2 or 3.

Spec. Desc. A tall tree. Leaves triangular spear-shaped, acute, smooth, doubly serrated. Male catkin, scales tipped with brown, smaller scales fixed to the centre. Blossom egg shaped, concave, green. Woods, moist hedges. Bloss. April, May.

Use. If a hole be bored in the tree when the sap is rising in spring, a liquor well known for its saccharine qualities distils from it, which, properly fermented with the addition of sugar, makes an agreeable and wholesome wine. The leaves afford a *yellow dye*. The wood is firm, tough, and white; useful to the turner and the cooper; packing boxes and heels for women's shoes are made of it, and the knotty excrescences afford a beautiful varied wood. It affords excellent fuel, and makes the best charcoal; the soot is a good lamp black for making printer's ink. From the north of Lancashire and from Dungarvan, besoms made of its twigs are exported. The bark is extremely useful in the north of Europe; the Highlanders use it to

tan

tan leather, and make ropes of it; the outer rind they sometimes burn as candles, and it abounds so much with a resinous matter which is highly inflammable, that it is manufactured, sliced, and twisted together into torches; with the fragments interwoven the Swedish fishermen and Laplanders make shoes and baskets. Large thick expanded pieces, with a hole in the middle to fit the neck, they use as a surtout to keep off the rain. The Poles, Swedes, and Russians cover their houses with it in lieu of tiles; and over it the Norwegians lay turf three or four inches thick. The Americans make entire canoes of it. Before the invention of paper, it was used by the ancients for the purpose of writing on. In Kamschatka, hats and drinking cups are made of it. The celebrated *moxa*, or touch wood of the Laplanders, used by them as a cautery in the most acute disorders, is made of the yellow fungous excrescences of the woody part of this tree, which sometimes swell out between the fissures and crevices of it, resembling in substance the agaric. This tree is hurtful to pasturage, but it bears cropping well, and thrives in all kinds of soil; though best in shady places.—*Withering, Lightfoot, &c.* Horses, cows, sheep, and goats eat it; swine refuse it.

17. BETULA. *B. alnus.*

Ang. Alder, owler, oller.

Gen. Desc. As above.

Spec. Desc. A tall tree. Leaves roundish, glutinous, clammy, serrated; veins underneath, woolly at the base; *fruit-stalks* branched, wedge-shaped, very blunt; *catkins* brown. *Near water, moist soil.* Bloss. Feb. March.

Use. The whole plant is *astringent*. The fresh gathered leaves, which are covered with a glutinous liquor, some people strew upon their floors to destroy fleas; the fleas are said to be entangled in that tenacious liquor, as birds are in bird-lime. Mr. Pennant says, that about Dundonald in the Highlands of Scotland, the boughs are used as manure; cut in the summer, spread over the fields, and left during the winter to rot; in March the undecayed parts are cleared away and the ground ploughed. The bark dyes a red colour, and, with copperas, a black. It is also used to dye brown, particularly thread, and for colours to be saddened by copperas. It is principally used by the fishermen to stain their nets. The catkins dye green. The wood is soft and brittle, but it endures a long time under water, and is therefore used for pipes, and for laying under the foundations of buildings situated on bogs. Turners use it for shoe-leels, ploughman's clogs, and other articles.

Grass grows well beneath the shade of alder; but if this tree be planted in a low meadow, the ground around it will become boggy; whereas round the ash, it becomes firm and dry.—*Withering*. Horses, cows, sheep, and goats eat it; swine refuse it.

18. BETULA. *B. nana*.

Ang. Dwarf birch tree.

Gen. Desc. As above.

Spec. Desc. Leaves circular, scalloped; low shrub, upright. Trunk hard, stiff. Bark brown, roughish. Branches expanding, straight, scattered, tapering, woolly, gummy at the base. Catkins half an inch long. On mountains and wet heaths, bogs. Bloss. May.

Use. The leaves afford a finer yellow dye than that of the *betula alba*, or common birch. This shrub supplies the Laplander, in the summer, when he lives in the mountains, with fuel for the fires that he is obliged constantly to keep in his hut to defend him from the gnats; and, covered with the skin of the rein-deer, it forms his bed.—*Linne*.

19. MYRICA. *M. gale*.

Ang. Sweet gale, goule, sweet willow, Dutch myrtle.

Gen. Desc. Male and female fl. on different plants, in catkins. Calyx 2 leaves; blossom 0. Female drupa one-celled, superior. Seed 1.

Spec. Desc. Leaves spear-shaped, convoluted, sprinkled with resinous points, serrated towards the end, on leaf stalks. Stem shrub like, smooth rust coloured, with white dots. Flower-buds above the leaf-buds at the ends of the branches, which as soon as the fructification is completed, die, the leaf-buds on sides shooting out and the stem becoming compound. Buds composed of nine leafy shining scales. Flowers appear before the leaves. Female spike oblong, five rows, in each five berries, which are thickish, roundish, angular, three shallow clefts, to each of which a small tooth is fixed sprinkled with golden resinous dots. On bogs in gravelly soil, generally in large quantities. Bloss. May.

Use. The leaves have a bitter taste and an agreeable odour; in the Highlands and Hebrides, an infusion or tea made of them, is given to children to destroy worms.—

Lightfoot. The Welch also use it as a verminuge both in powder and infusion, and also applied externally to the abdomen. They lay branches of it under their beds to keep off fleas and moths, and they use it for dying wool yellow.—*Penn.* The Swedes use it, gathered in autumn, to dye

dye their yarn yellow, and sometimes employ a strong decoction of it to kill *bugs* and *lice*, and to cure the *itch*.—*Linnè*. It was formerly used by northern nations, and is still in the western isles and Highlands of Scotland, instead of hops; but unless it be boiled a long time, it is apt to occasion head-aches. The cones, (or catkins) boiled in water, throw up a watery scum capable of being made into candles, similar to those made by the Americans from another species of this plant, the *M. cerifera*. It is used to *tan* calf-skins. Its essential oil rises in distillation. Sailors are fond of besoms made of it for sweeping their ships.—*Lightfoot*, *Withering*. *Linnè* suspects from the smell, that camphor might be prepared from this plant. Horses and goats eat it; cows and sheep refuse it.

20. CUSCULA. *C. Europæa*. *C. epurtica*. *C. cperica*.
Ang. Dodder.

Gen. Desc. Calyx four or five-cleft; blossom one petal; caps. two-celled, cut round. Seeds in pairs.

Spec. Desc. Flowers sitting, four-cleft, whitish. Leaves 0. A paralytical plant without seed-lobes. In hops, nettles, heath, &c. Bloss. July, August.

Use. This is a very curious and singular plant, which will not grow in the ground. See *Bot. Acc. of it*. It was formerly celebrated as a *cathartic*, but is a very languid one, and now out of use.—*Hill*.

Tetandria Tryginia.

21. BUXUS. *B. sempervirens*. *B. aborescens*.

Ang. Box.

Gen. Desc. M. and fem. fl. on the same, or on different plants. M. calyx three-leaved; bloss. two-pet. germen, a rudiment. Fem. calyx four-leaved; bloss. three-pet. caps. three-celled, three-beaked. Seeds 2.

Spec. Desc. M. and fem. fl. on the same plant. Leaves oval, thick, glossy. Blossoms greenish white or yellow. Fruit a dry capsule. Woods. Bloss. April.

Use. An empyreumatic oil, distilled from the shavings of the wood, is often used as a topical application for the *piles*, and seldom fails to procure ease; it will frequently cure the *tooth-ache*, and it has been given internally in *epilepsies*. The leaves powdered destroy *worms*. The wood is very hard, smooth, and a fine yellow, and not being apt to warp is well adapted for the use of the turner; it is made into combs, mathematical instruments, knife handles, button moulds, &c. In the south of Europe it is cultivated in pots, like myrtle with us.—*Withering*.

[To be continued.]

ON THE PRESENT STATE OF OUR KNOWLEDGE OF OPIUM.

By A. F. GEHLEN, of Berlin.

OPIUM, a substance so long known, of such great importance in medicine, and such extensive practical utility, has been frequently examined, but by no means so thoroughly, as not to leave many doubts respecting its nature and origin. It is even not as yet ascertained, whether good opium be obtained by incision of the capsules of the poppy, as Mr. Kerr relates, in form of an extilled juice, or whether it be prepared by expressing the ripe poppy heads, by boiling them, and evaporating the juice. For the probability of the first method being employed in order to obtain this substance, it is alleged, that it contains albuminous matter, and that its aqueous extract is perfectly soluble in alcohol, which would not be the case, were it prepared in the latter way; no albuminous matter would then be found in it; on the contrary, a great quantity of mucilage, which the heads of the poppy, on being boiled, yield in a considerable proportion, and the presence of which must necessarily prevent the perfect solution of the aqueous extract in alcohol. However plausible these arguments may appear, they are not sufficient for removing all doubts, because if the proceeding in evaporating the expressed juice of the poppy heads were the same as that employed in our laboratories for the preparation of the inspissated juices of hyosciamus, cicuta, and other narcotic and acrimonious plants, a portion of albuminous matter will, notwithstanding, be contained in it. Against the perfect solution of the aqueous extract, as an argument of its containing no mucilage, it may be suggested, that the proximate constituents of vegetables, as long as they are mixed with one another, are acted upon in a quite different way if treated with them separately. Thus Mr. Buchholz found in 500 grains of select opium, 150 grains of gum, although the solution of the aqueous extract, mixed with an equal quantity of alcohol, appeared quite clear and transparent.

The interesting experiments of Cit. Dubuc render the preparation of opium, as related by Mr. Kerr, still more doubtful. He maintains, that at least the fourth part of opium consists of impurities, which, on examination, were found to be particles of the stem, leaves, capsules, and seeds of the poppy, most minutely divided; and it is to this admixture, that he ascribes the peculiar narcotic odour

odour of that substance. He farther remarks, that this odour is very volatile, and often no more, or in a far less degree perceptible on the surface of opium, while it still remains strong and nauseous in the internal tough part; whence he concludes, that this volatile particle is merely accidental; an opinion which he endeavours to confirm by the following experiments.

1. On drying fresh and tough opium by a heat of 40—50° Reaumur till it becomes pulverisable, it entirely loses that stupifying odour, retaining that of purified opium or laudanum, from which it only differs by the heterogeneous particles which it contains. When these volatile particles, which are disengaged during the exposure of opium to the heat, are collected by a proper apparatus, they will for the most part be condensated to a clear liquor, the colour of which becomes a few days after straw yellow; one part of it, however, retains the form of gas, which is never perfectly miscible with water. Both give the odour of fresh opium, but in such a high degree, that animals brought into this mixture are immediately suffocated. Mr. Dubuc mentions here, that he has several times prepared an extract from the white poppy heads, at different times of their growth, without ever obtaining a substance of the true odour of opium, or laudanum; but he observed, that volatile-smelling particles were disengaged from a quantity of leaves of poppy, which being extremely similar to the substance obtained in the former experiment, induced him to make the following.

2. Leaves of the white poppy were squeezed and triturated in a stone mortar, by which they yielded a great quantity of a milky brownish juice which had a bitterish taste. On exposing it to the air, at a temperature of 10—12° Reaun. it had puffed in one day considerably, and gave at the same time a strong narcotic smell, similar to that which is exhaled by fresh opium. On the fourth day the exhalation had increased to such a degree, that no person could approach it without a violent head-ach. On the fifth day the vessel was exposed for about twelve hours to the action of the sun, and the juice frequently stirred. In a few hours the stupifying smell gradually diminished, and was followed by another much resembling that of azotic gas. The juice, together with the vegetable particles, acquired a darker colour, probably owing to the azote disengaging itself, which, united to the odorous principle arising from the mass, constitutes the above-mentioned peculiar smell.

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3. After having made this observation on the origin of the peculiar smell of opium, he took twelve pounds of poppy, nearly of their full growth, and treated them as in the foregoing experiment, but without exposing them to the sun. Two days after the whole mass began to ferment, and the narcotic odour to be disengaged, and two days after it became still more perceptible. He now expressed the juice, and having filtrated it, he evaporated it by a gentle heat to the consistency of an extract, but he did not succeed in obtaining true opium, because the juice, as it was thickening, gradually lost the narcotic smell, and only retained that of a scentless plant.

4. He was equally unsuccessful by inspissating the juice of poppy on flat vessels by the heat of the sun.

5. He gently evaporated the juice of the young heads of poppy, partly taken from the plant in flower, to half its quantity, in hopes, by the mass being more concentrated, of obtaining a substance retaining the odorous particles. The juice thus far inspissated, began to ferment somewhat later, than the former, and on the tenth day had received the above-mentioned smell; but on being evaporated, the extract showed no difference from that obtained by the foregoing experiments. Half of the juice was preserved for future experiments.

6. Thirteen ounces of poppy heads, full grown, but still green, and four ounces of leaves and of the stem, were squeezed and perfectly triturated into a thick glutinous mass. On being exposed to the contact of air, it soon passed into fermentation, and after four days it had the smell of opium. Part of it being evaporated at a temperature of about 40° R. retained a weak smell of laudanum, and much resembled common opium. Mr. Dubuc relates here some experiments he made for obtaining opium by making incisions into the peduncle and the inferior part of the capsules of poppy. A yellowish, almost scentless, but very bitter juice extilled, which received a darker colour by the contact of the air; its taste remained the same, but the smell soon became narcotic, and on being exposed to the sun it dried, retaining only the smell of laudanum. Mr. Dubuc observed two species of poppy, the heads of one of which were exactly globular, while the others were rather oblong. The former yielded opium without incisions, as it issued from two, three, or four sutures, that could be discovered on the peduncle; and after it had thickened, it received the colour and smell of laudanum. It could be collected in small pieces of about four grains each.

Mr,

Mr. Dubuc took two grains of this substance, which produced a long and quiet sleep.

7. He prepared the extract from a considerable quantity of poppy by decoction, which being saturated, became milky on cooling, without having the least smell of opium. He then evaporated it till it could be pulverised.

8. One part of this dry extract was mixed with as much of the juice preserved from the 5th experiment, as was sufficient to give it the consistency of common opium, and the whole mixture resembled laudanum in colour, smell, and taste.

9. The rest of the last mentioned extract was likewise mixed with as much of the residuum of the 6th experiment, as was required to give it the consistency of opium. Three days after, the preparation of this substance became so very similar to opium, that it might have been taken for good opium.

Although the results of these experiments are by no means decisive, yet it appears from them, that a similar method of preparing opium may be adopted in oriental countries, viz. by inspissating the expressed juice of the heads of poppy, and mixing it with the triturated and fermenting mass of the whole plant; because the opium ex-tilling from the incisions of the capsules did not retain the strong narcotic smell of common opium. It is not unlikely that in preparing opium, the expressed juice is heated, and the green albuminous matter which is separated during that process, is exposed to the air, till it has received the narcotic smell, when it is mixed with the clear inspissated juice, formed into cakes, and wrapped in the leaves of the poppy. These experiments of Mr. Dubuc are confirmed by similar ones made by Mr. Kuehn, apothecary at Arnstadt.

The same uncertainty which takes place in the manner of preparing opium, also obtains with respect to our knowledge of its constituent particles. In the analysis of this substance, the different sorts ought to be attended to, and the results of their examination compared with each other, which would at the same time throw light on the whole composition of this substance, and account for the results of former analyses; particularly, if regard was had to the methods employed by different chemists in the chemical examination. The analysis which Mr. Buchholz has undertaken with opium is, in this respect, not quite satisfactory, though it is otherwise very accurate and excellent. The chemical examination of that substance, which has
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been related by former chemists, may always serve to illustrate several points that are not yet well understood; on which account I shall here give the results of the proceedings undertaken by different chemists with opium, whereby the reader will be enabled to judge which points, in the knowledge of the chemical composition of that substance, requires still to be illustrated. The sensible quality which first attracts our notice on examining opium, consists in its narcotic smell. The constituent part which produces this smell is of a volatile nature, imparting itself both to water and alcohol, when these are distilled with opium. It seems not to possess the nature of essential oils; at least, Mr. Buchholz could not obtain any trace of it by distilling it with water; but the quantity with which he operated in his experiments consisted only of 500 grains, and was consequently too small to render his results quite certain. He administered two ounces of the concentrated distilled water of opium to a dog, on which it produced no deleterious effects; whence he concludes, that the efficacious parts of opium do not depend on those volatile particles, and that consequently opium may be boiled with its dissolvents without any fear of losing its efficacious particles. These conclusions, however, seem not to be sufficiently confirmed by that experiment, as it is known that dogs will bear a great dose of opium; especially, as the dog on which Mr. B. made his experiments was diseased, which certainly had some influence on the operation of the opium.

Mr. Dubuc mentions in one of his experiments, that an atmosphere impregnated with the exhalations of opium is deleterious to animals. It is, however, known that opium is not deprived of its efficacy by the loss of the narcotic smell, though it is not yet ascertained to which part of opium the *vis narcotica* adheres. Neumann and Hoffmann ascribe it to a particular constituent of opium; an opinion which has not much been regarded in modern times. This substance is said to be of an oily but not of a volatile nature, to rise in form of a fat, tough, and strongly smelling scum to the top of the liquor, if opium be dissolved in water by infusion, digestion, or gentle decoction, and to possess the narcotic properties in a very high degree. Dogs that could take more than one drachm of opium, without any noxious effect, were killed by a few grains of that substance. From a pound of opium two or three drachms are said to be obtained. It communicates its smell and narcotic power to water distilled with it, but it is not volatilized.

utilized. Mr. Josse is of a different opinion on this subject. He maintains that the narcotic and excitant qualities of opium are contained in the glutinous matter of opium. In order to obtain this substance, he treated opium, divided into pieces of one ounce weight with water of 30—36° R. in the same manner as is done to obtain the gluten from the flower of wheat; by which proceeding the surface of opium was softened and covered with a gluey fibrous matter. After all the soluble parts were dissolved in water by continued kneading, the gluten remained as an elastic dark brown substance, of such a penetrating smell and taste of opium, that the smell of it alone would excite vomiting. Exposed to the air it dries up and loses its elasticity, resembling burned earth, but retains its strong smell of opium. If kept moist, it passes into putrefaction, spreading a great stench. Mr. Josse obtained from one pound of opium 6½ ounces of this substance, which, when dry, were about five ounces and some drachms. Exposed to dry distillation, it shews no difference from the glue of flour, or any other substance that contains azote. Digested with 4 parts of alcohol it imparts to the liquor a brown colour and a disagreeable smell; but the pieces of this substance used for digestion neither changed their form nor size, though they lost the eighth part of their weight, which, on being distilled, remains as a scentless very bitter resin, the alcohol itself passing over with the narcotic smell with which it was impregnated on being digested with opium. The above mentioned glutinous substance, thrown into hot oil, does not change its colour when it is dried; but when added to the oil in its fresh state it becomes green. It is said to be soluble in vinegar and other acid vegetable liquors, and to be precipitated by alkalis in flakes which have the smell of opium.

From these observations, Mr. Josse concludes, that opium is a preparation of the juice of poppy; that the acid corrigentia of opium are not capable of diminishing the much dreaded narcotic property, but, on the contrary, that the narcotic effect is increased by them, as being dissolvents of the glutinous substance; that Spanish wine is best adapted for dissolving the extractive parts of opium, as it does not act on the glutinous matter. Lastly, he adds, that from the common great poppy an extract may be prepared, resembling in its efficacy, as well as in other properties, true opium. It is, however, probable, that what Mr. Josse calls gluten, is nothing but the albuminous matter, which is separated by boiling from the expressed

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vegetable juices, as he compares it with a similar substance, contained in the extract. cicut. when prepared after Baron Stork's method.

[To be continued.]

DR. WALKER'S REMARKS ON MR. GOLDSON'S PAMPHLET.

(Continued from Vol. xi. p. 505—508.)

THE insertion in your last Number of the Remarks, which I most hastily made on the cases of small-pox after supposed vaccination, require on my part a farther prosecution of the subject of Goldson's pamphlet, to which I now go to give an hour or two more.

Pages 36 to 40 exhibit two cases of small-pox produced thirteen and fourteen months after (*supposed*) "Vaccination by Mr. Weymouth." This gentleman had matter from the Central House on the 16th ult. *Allons.*

Page 41. "No difference in the appearance of the arm or the symptoms of Clark from any of the five marines." Then they will be all liable to take the small-pox as Clark and Sarah Smith did, if not re-inoculated.

Page 46. "It is not to be presumed that a public board, directing experiments to be made on the subject in an infirmary under their controul, would be so inattentive as to send such (matter) as was improper for that purpose. There could be no opportunity of its being decomposed, or deteriorated, while in possession of Mr. Rickman, as he used it on the same day he received it." But a stage coachman carrying in his pocket the little packet of guardian matter, getting off in the night to take his beer, and 'drawing up' to the fire of the inn to warm himself well before he again mounted his box, could decompose it. Matter, I believe from Golden Square, sealed up in great form, with the impression of a cow, I have known to prove effete; it was in the county of Surry. Matter packed with equal neatness, but heated in applying sealing wax, I have seen completely destroyed; it was on the Mediterranean between Gibraltar and Minorca.

Page 47. "From Langley (a marine) matter was taken for me, which I used on two children of Major Noel; and from these I vaccinated others in succession. They both resisted variolous inoculation six months afterwards." It sometimes happens to myself that I don't succeed in producing

ducing the vaccine vesicle by the first puncture. Have the children, in such case, *resisted* the inoculation? It is perhaps through my extreme tenderness to them, scarcely letting them feel the lancet, or through some untoward application of the instrument, rather than from any sort of insusceptibility in the subject, that I have not succeeded. I have also failed for a time, at least in one instance, through the system being previously occupied with some other morbid affection. I can shew in this metropolis pretty permanent marks, though perhaps not indelible like the cicatrix or eschar invariably following vacciola, as well as *other* solutions of integument, produced on the skin by my vain attempts from week to week to vacciolate the subject. The child had extensive eruption both on the forehead and neck, the herpetic character of which manifested itself at the place of application of the lancet, and forbade the entrance of the vaccine virus into the system, while in the struggle, if I may so express it, *something like*, a *very little* like, cow-pox was produced. I was obliged to assure the mother that her child was not, and could not then be, protected. In less than three months after this I succeeded completely in vacciolating the child, and assured her that it was impervious to every attack of small-pox. The subject, as appears from the register, was Robert Hughes, No. 12, St. Paul's Chain, a child half a year old.

I have so often seen troublesome eruptions in children swept away by the vacciolous inoculation (the genuine vesicle being first produced from which there could be no objection to inoculate, but which in its last stages exhibited very exactly the light coloured scab of the previous eruption, instead of the dark one of uninterrupted vacciola) that I lately inoculated a child (completely vacciolated last year at the age of two months) because of its being very sore behind the ears. The mother in a week shewed her child much relieved, and having so specious a pock on its arm that a medical man so particular in the choice of his matter, that he waited at the Central House to see the subject it should be taken from, on arrival of this child preferred the specious pock, till he was informed of its history, when he contented himself with matter from one having more appearance of inflammation about it than was desirable. The subject was a child ten months old, Charles Good, No. 22, Lambeth Hill, Doctors' Commons.

Page 49. "Langley was found to resist variolous inoculation, &c." Suppose all this to be perfectly correct; it
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does not follow that he resisted because of his having been previously inoculated. In Marmorice Harbour, on my endeavouring to set before some hesitating sailors, in the expedition to Egypt, the advantages of the vacciolous inoculation, some of them said they had often been exposed to small-pox without taking it. "So have I," said an old seaman, "till I was older than any of you. I have even helped in the hospital to carry out those that died of the small-pox, and escaped. But it caught me at last; you see how it has marked me, and I was half a year in recovering my strength after it." What a confirming case would this have been of W. G.'s conjectures, if the sailor had ever been previously, spuriously, vacciolated!

Does W. G. suppose that the Variolous Inoculation has never been incomplete? never spuriously conducted? The expedition, in Marmorice harbour, exhibited a motley assemblage from various nations; most of the numerous European languages were spoken in it; the Turkish, Arabic, &c. The errand of a figure, without uniform, daily setting out from the Admiral's ship, to visit the different vessels of the fleet, excited some attention.* I had instances mentioned to me of the Small-pox inoculation having failed to yield any protection in different quarters; but let me substantiate the general assertion by a particular statement. The lieutenant-colonel (Stuart) of the 42d (Highland) regiment, whose name appeared as an authority in the late dispute respecting the capture of the standard of the *Invincibles* before Alexandria, is very much marked with the small-pox. He told me he was inoculated when a boy, was considered to have gone thro' the disease; but afterwards took it in the natural way.

I am apprehensive that it may be supposed, from my holding the office of Resident Inoculator to the Royal Jennerian Society, that my remarks come from the Society itself, which the author has with such want of accuracy approached, by addressing his pamphlet "To the Directors of the *Vaccine Institution*." The proceedings of their Medical Council, read and approved at their last Quarterly Court, shew that they do not consider the pamphlet of W. G. in the same serious light that I do.

"At a Meeting of the Medical Council, May 15, 1804,
Mr.

* Dr. Walker being at Malta when the expedition under Sir Ralph Abercrombie and Lord Keith arrived there, he consented to accompany it, the Small-pox having got into the fleet and being very fatal.

Mr. Ring in the chair, the following message was sent to the Board of Directors.

"The Medical Council having taken Mr. Goldson's Pamphlet into consideration, inform the Board of Directors, that they are of opinion it does not appear to require any particular notice from this Society."

Would it not be eligible and truly respectable for medical men in every quarter to form Jennerian Societies? It would distinctly mark the liberality and disinterestedness which so many of them, advocates for the new practice, already exercise in their profession. To do away every jealousy, let the oldest member of every association be the President; the youngest the Secretary. It belongs to them, in reality, the forming of the public opinion on medical affairs. Consider this ye guardians of public health! Ye have no idea of the exertions that are made by the gain-sayers of the discovery, which, said an intelligent Greek to me in Egypt, is the '*Glory of your Nation*,' is the consolation of the world. Ye have no conception of the pains that are taken to spread terror and dismay among families, even by the gratuitous diffusion of the specious statements of the pamphlet under notice. Why did not the author, holding the copyright in his own hands, to prevent distraction among the unsuspecting multitudes, endeavour chiefly to confine his 'facts and observations' to your attention? Then they might have been examined "with that calmness and moderation which should ever accompany philosophical research." Had the manuscript been addressed to the Royal Jennerian Society, they would probably have considered all its errors as the exuberant effusions of an ingenuous though biassed mind, and paid a respectful attention to its mistaken and well meaning author. But no! it is committed, with all its faults, to the perusal of the wide world, to bewilder those who waver, to realarm those who were at length at rest. Hence the fond parents, unable to distinguish, may look on their blooming offspring, heretofore eyed with rapturous delight, in the saddest expectations, the most gloomy solicitude; and the lustre of the eye, which would beam on them consolation and joy, they may, by a tormenting anticipation, see closed up in endless night. But, surely, medical men will every where endeavour to dash the poison from the cup, and do justice to humanity, in preventing the weaker judgment of the credulous from being imposed on. Already the one or two remaining opposers of the new practice, in the profession, have failed in their attempts to produce small-pox af-

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ter vacciolation, and the wealth and influence employed in giving gratuitous diffusion to the pernicious pamphlet will be deprived of their baneful and baleful effect while medical men remain unperverted. To them, I repeat it, belongs the forming of the public mind on medical affairs. The Royal Jennerian Society may long in vain continue to look towards public men, for *active co-operation*; they are all too much engaged with political affairs. If medical men, as was very early suggested by the President (Duke of Bedford) would come forward and co-operate with the Society, the great object would be attained, THE EXTERMINATION OF THE SMALL-POX.

I am, respectfully,

Salisbury Square, 14, rj. 1804.

JOHN WALKER.

P. S. I have just been called upon by the gentleman that had the matter "for Dr. Waller, of Portsmouth," who wishes to know what were his exact words on application; and he has written for answer, that, "the exact words were a simple application for matter, with the remark that that which they have, *does not produce the desired effect.*" In the mean time, applications from that quarter are continued at the Central House, as appears from the register.

"Mr. William Postlethwaite, Chichester."

"J. Wilkinson, Portsmouth."

"John Griffin, Minister of Orange Street Chapel, Portsmouth."

"William Munday, Chichester."

"Mr. Phillipson, Chichester."

The applicants from Portsmouth, like the thousands throughout the empire, as well as in both hemispheres, or on both sides of the Atlantic, and round the Capes Horn, Good Hope, and Van Diemen, are, the majority, unknown to me. These, with those whom I am personally acquainted with, must excuse my exhibition of their names. The great cause of humanity requires it; and when the ephemeral alarm from the pamphlet shall be quieted, the families they attend must recognise their seasonable vigilance, and, as I suppose, their *acumen* too, superior to that of the author, who with profession of honourable motives has, *perhaps unwittingly*, attempted a work with which that of Eratostratus the Ephesian, on the night of the birth of the founder of Alexandria, dwindles to a point without dimension in the comparison.

Will you now inform medical gentlemen, every where, through your extensively circulated Journal, that on application

plication for vaccine ichor, they may save themselves the expence and trouble of paying the postage, by directing, "To the Secretary of the Royal Jennerian Society, Salisbury Square."

The increasing numbers of patients at the Central House, will, I hope, enable me to continue to supply every applicant. The Post Office has already liberally granted the privilege of sending it free throughout the empire; and it only requires some arrangements on the part of the Society to enable medical men to receive it without expence to themselves, and to co-operate in the great object of exterminating the Small-pox.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

THE Pamphlet, which is the subject of the Remarks at p. 505 of your last Journal, contains cases of small-pox at the distance of *three years* from vaccination, happening in subjects, who, during the intermediate space, had been submitted to the strongest influence of variolous infection. It is addressed to the Directors of the Vaccine Institution, requesting them, in terms I believe perfectly respectful, and with that degree of moderation which becomes the subject, to turn their attention to it, and seriously to investigate, what I am forcibly led to conceive a defect, hitherto not *publicly* noticed in Vaccination. Prior to its publication, I sent a letter addressed to the Secretary, at No. 14, Salisbury Square, accompanied with a copy of the publication, requesting that it might be delivered to the Directors in my name, as a mark of my attention. I presume the letter was delivered, although I never received any answer to it. But Dr. Walker, who is the author of the Remarks I allude to, can inform you, as he resides, I believe, at the house where the letter was left.

In those Remarks, although on a subject so important to the interests of society, he has been pleased, at first sight, to deem them cases of spurious cow-pox, without adverting to their resistance of small-pox, so evidently during a limited period; a feature so prominent as to distinguish them from any *hitherto* brought before the public. These remarks are likewise conveyed in language so illi-

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beral, and are replete with so many misrepresentations, which must be deemed wilful, that I should have suffered them to have passed unnoticed, had not the author been principal Vaccinator, under the Directors of an Institution, to whom the Pamphlet was respectfully addressed. From their characters however as gentlemen, I am confident, it was sent to your Journal without their knowledge.

A postscript is added to the Remarks, asserting, that, "Dr. Waller of Portsmouth had just made an application at the Central House of the Royal Jennerian Society, for vaccine matter, with the remark, that that which they have there cannot be depended on; and on that account he sends to the Society, where he reckons upon being furnished with the genuine."

If Dr. Waller ever made such an application, it must be deemed extremely illiberal, not to me alone, but to the whole of the profession in the vicinity. This, however, he publicly denies, and says, he never had any correspondence with Dr. Walker, and never gave any authority for such an assertion.

To men of *real* humanity, and to lovers of the truth, I am confident the importance of the subject will be an inducement to investigate it. With respect to them, I need not, but with regard to Dr. Walker, I must request you will insert the concluding sentence of the pamphlet:

"It is far from my wish to provoke controversy; I only ask for further investigation. Vaccine Inoculation must stand by its own merits, or fall from its own defects. To suffer zeal for the discovery to shut their eyes to conviction, and, by deeming every failure spurious, to conceal it, is beneath the dignity of the profession. If it does not ultimately prove a permanent prophylactic, the consequence must be, that the small-pox, at some future period, will become a greater scourge to the world than ever, independent of the distress of mens' minds from their being left in such a dreadful state of anxiety. Let me beg therefore, that in conducting this investigation, the words of Dr. Jenner may be had in remembrance. "I again repeat my earnest hope that it may be conducted with that calmness and moderation which should ever accompany a philosophical research."

I am, &c.

W. GOLDSON.

Portsea, June 4, 1804.

To

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

I Beg leave to communicate the following observations on the case of fatal diarrhœa which appeared in your Medical and Physical Journal of last month, signed Academicus.

It must be allowed, that medical men who are in the habits of visiting patients, have a peculiar advantage over those who reside at a distance, in discovering the cause and manner of removing every disease; and had not the symptoms in the present case been so well defined, and such as have frequently occurred to me, I should not have ventured to submit my remarks on the subject.

It is very well known that during the period of teething, children are subject to such symptoms as affected the child in question. Various other causes may also occasion similar complaints, and the application of cold may produce them, or aggravate the indisposition.

In the present instance, pudding was generally allowed, and a little good Port wine occasionally, (doubtless from the best intention); but as the former generally contains the white of eggs, and as the latter, however good in quality, seems to be by no means adapted for assisting the digestion of an infant, I conclude both had a tendency to disturb the digestive process, especially as his diet was plentiful; and possibly the child might have been too often permitted to make use of improper things, which parents, from affection, suppose he might be indulged in with impunity.

I think it very difficult for any man to say what was the real cause of the child's illness; I generally attribute such complaints to the presence of indigested sordes and accumulation of slime, which occasion symptoms similar to worms, such as rubbing the nose, &c.; an interruption or regurgitation of bile are also frequently produced by the same cause, and similar symptoms follow; but dissection would have been the most probable means of satisfying the anxious enquirer. Having had a great number of children under my own eye, affected with very similar complaints, of different ages, from three months to three years and older, perhaps Academicus may not think it amiss, if I mention the mode of cure which I have generally proved to be successful, though he did not require it.

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An emetic was generally given first, then calomel with resin of jalap, scammony or rhubarb; these were repeated as often as the case required, sometimes daily, though the evacuations might be much in quantity, especially if other symptoms did not abate, if the stools continued greenish, or corrupt. When parents, from timidity, would not consent to have an emetic given in season, I have frequently found it indispensable, though alvine excretions were copious and the stomach not accustomed to urge; small doses of prepared chalk and tinct. opii camph. have sometimes been needful to restrain excessive action of the bowels and to alleviate pain, and sometimes mild glysters have removed hard balls of fæculent matter, by which means the cough and oppression proceeding from the state of the stomach and bowels have abated, the natural secretions have been restored, the yellowness sometimes attendant, removed, and the usual vigour and rosy appearance regained, though their desponding parents supposed them to be almost exhausted by a consumption of a very different nature. Such disorders sometimes occur to children while under inoculation; and if fatal, the deaths of the patients are improperly attributed to inoculation.

I take this opportunity to mention, that I inoculated with the same cow-pox virus three children in April last, about the same time, in different parishes; the first had a very distinct chicken-pox during the second week from the time of inoculation, it being prevalent at the time, and the two others, during the second week from inoculation, had the measles with their usual symptoms, the contagion at the time being very diffusive; the inoculated part on the arms of the children had also the usual appearance and degree of inflammation; neither of the children were dangerously ill.

Hayle, Cornwall,
June 11, 1804.

I am, &c.

R. O. MILLETT, jun.

On the beneficial Effects resulting from Mercurial Inunctions in Typhus, illustrated by the Case of a Private in the 21st Regiment of Dragoons, attended by Mr. CUMING, in Romsey.

IN the statement of this case, it shall not be so much my business to enter into the minutiae of detail, as to give you the outlines of the patient's symptoms and my practice

tice; for, in general, the monotonous recital of a diary is extremely dry and irksome.

On the 19th of May, I was desired to visit — Benson, who I found in a state of pyrexia, accompanied with dysentery; his dejections were frequent and bloody, and his countenance remarkably sallow. I prescribed gr. x. pulv. ipecac. comp. 3tia. q. h. sumend. but finding the opium contained in this medicine, insufficient to procure him repose, he took tinct. opii gtt. 40 horâ decubitûs. In the morning of the 20th, I found him rather better; he had been less disturbed during the night than he had been for some time. It is necessary to remark, that he had been long subject to the complaint, and that now it might properly be denominated chronic dysentery. These medicines were continued, and with the happiest effects, in as much as related to the alvine discharge, which began to assume a natural appearance, without the smallest mixture of blood; though there was not any remission of fever, which from the first belonged to the typhoid type, his pulse being often weak and tremulous, tongue nearly covered with a brown fur, the sensorium greatly affected, from the state of amentia I generally observed him to labour under. On the 21st I applied a blister between his shoulders, which roused him a little, and on the 22d I prescribed the volatile alkali, with tinct. lavend. comp. and a bolus at bed time c. pulv. ipec. comp. gr. x. These remedies were continued without any apparent benefit until the 28th. The corona capitis had been shaved, and cold applications of vinegar and water were constantly used, but did not operate very powerfully in restoring lost energy, yet I am persuaded they were useful. I also had the patient taken out of bed, and tried the effect of cold affusions, which I believe would have been attended with considerable benefit, if they had been persevered in; but he was so circumstanced, in point of lodging, as to render this plan extremely inconvenient. I therefore had recourse to mercurial inunctions, and by way of exciting their effects more speedily, administered calomel gr. ij. pulv. antimonial. gr. vj. opii gr. ij. cons. ros. q. s. ft. bol. No. iij. capt. j. ter de die.

These remedies were continued till the 6th of June before their action on the system became evident; that is to say, prior to the mouth being affected, or any degree of pyalism produced, though a surprising amendment was observable; the secretions were set to work; he had for two or three nights been bathed in perspiration, his tongue

became moist, and the digestive faculties of the stomach were again exerted; hitherto he had loathed every thing offered to him, save toast and water, rice and rice-milk, Port wine, &c. and these things were not often relished; but now he expressed a wish for animal food, and was allowed beef, mutton, or veal soup. The mercurial applications were discontinued, and the acid vitriol. dilut. with tinct. lavend. com. was given during the day, with an anodyne at night. Many may suppose that some more powerful tonic, such as the decoct. cinchona, would have been preferable; but experience has taught me, that the recovery of men in similar circumstances, has been often retarded by bracing up the system too suddenly. He took at this period near a pint of Port wine in the day, and a tumbler or two of mild ale, which he also had previous and subsequent to the mercurial course. His convalescence was sufficiently rapid to authorize me to conclude that it was quite unnecessary to alter this treatment; the troop marched on the 13th of June, and three or four days prior to this time his wine was gradually diminished, and his allowance of ale augmented.

The good effects of the mercury in this case was strikingly displayed; the fever, with every concomitant and untoward symptom, after the dysenteric complaint vanished, continued without intermission, and death seemed already brandishing his dart over his devoted victim, until the paralyzed organs were roused from their lethiferous lethargy by the stimulus of this potent medicine, which has long been highly extolled in the cure of fevers incident to tropical climes. Then, as there is reason to imagine that almost all fevers are governed by the same laws, though differently modified, according to constitution or country, it is highly probable that a more general adoption of the use of this remedy, in private practice, would be productive of the best effects, and considered a most useful auxiliary in the treatment of complaints that not unfrequently baffle all human skill.

When opportunity offers, it is my intention to transmit you an account of the great and inestimable advantages, to be derived from the liberal use of tinct. digitalis, in cases of pneumonia; when carrying bleeding to such lengths as is generally done, frequently undermines the constitution, and produces dropsies, with other evils of no less magnitude than those which it was designed to cure; for that practice, surely, can never be too much decried, which removes one disease, to make way for another more lingering, and equally fatal,

June 15, 1804.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

I Again lay before you a few desultory remarks on modern Pharmacopœias, as a continuation of those admitted into the Medical and Physical Journal for April, which were chiefly applicable to the *Pharmacopœia Edinburgensis*. These I now offer, although drawn from a different source, may be equally, if not more, acceptable to those whose opinion coincides with mine; I shall, therefore, without farther apology, submit them to your care.

In the preface to the "Edinburgh New Dispensatory," which may be considered as a very excellent translation of that from the college, it appears, that the honor, if there be any, of first adopting the new language in a dispensatory, belongs exclusively to the College of Edinburgh. This claim, I suspect, may be fairly disputed, were it worth the trouble; for if we look into *Pharmacopœia Medici Practici Universalis*, lately published by Dr. Swediaur, we shall find, that the very last edition, with all the refinements of modern nomenclature, both of Chemistry and Materia Medica, have been adopted, in their most ample acceptance, by that author. If there be any difference it is, that as it has been employed much more extensively, there is, consequently, more confusion.

This Pharmacopœia is dated, "Paris, Feb. 16, 1803," which makes it prior to, if not coeval with, that of the Edinburgh College; it must, therefore, deserve, at least, an equal share of our acknowledgments for having adopted and cultivated this "pure language of science." This may be farther confirmed by attending to the *synonyma*; for when any thing is quoted from *Pharm. Edinb.* it is invariably from the *former* edition; thus *lixivia* is classed with the modern *potassa*. However, to compromise this matter, let us consider these works as contemporaries, and also that they form, as I shall venture to assume, two fair specimens of modern dispensatories, and of the vaunted perfection they have at last attained.

A very slight perusal of this Dispensatory will not permit me to wade through every page, and point out what I conceive to be either the whole of its defects or its perfections. As it is, however, of more serious importance to notice some of the former, lest silence should give currency to some glaring and very reprehensible errors, I

shall confine these cursory observations to one side of the question only with but little variation.

Through the whole work there appears an avowed intention, that a synoptical list, including all the *synonyma* of each composition, should always accompany and be placed immediately after the title. Had this scheme been properly accomplished and strictly followed, it must have proved a very useful, and in the present state of science, a most necessary guide.

In many instances we may observe, in this list, great confusion; in others, numberless mistakes; some names of the most interesting nature are entirely omitted; others of a most insignificant import carefully retained; and now and then we find no list whatever, where, perhaps, it was most required.

We may frequently observe the *synonyma* spun out with tedious minuteness, and a kind of drawling redundancy; including most of the obsolete and fantastic names; and what is unpardonable, omitting those of *modern* date. What has the present generation to do with the *alcahest de Van Helmont*, *arcanum corallinum*, *sal cardui benedicti*, or the *lana philosophica*? Would it not have added more to our knowledge to have left out such as these, and admit a *mercurius corrosivus sublimatus*, or a *hydrargyrus nitratus ruber*?

One would naturally conclude that in a work dedicated to the manes of four illustrious British physicians, as this is, the *synonyma* of at least all the *British Pharmacopœias* could not have escaped the author's notice; that our *creta preparata*, our *zincum calcinatum*, our *hydrargyrus muriat*, and many other guiltless articles, might have deserved a situation. Had this been attended to, science might have received some support, and much more advantage, than can possibly accrue from the *cadmia fornacum*, a *pulvis principis*, and an endless farrago of absurdities, now generally expunged.

There is, I am sorry to say, one very serious case of the most reprehensible kind, that merits the attention of the whole medical world; whether the blame attach to this *Pharmacopœia* or to the *Pharm. Edinb.* is left to others to decide, and to deal out the *quantum meruit* to whom it may be due. I had scarcely opened the pages of Dr. Swediaur's work, when I perceived that the *urias hydrargyri* of the Edinburgh College was not the same as in this *Pharmacopœia*; that they were two very opposite things; in short, to speak plainly, that *urias hydrargyri* in one

means *corrosive sublimate of mercury*; and in the other, *calomel*!!!

This is surely no very trivial error, for the name of a mild and very manageable medicament in one country, to signify a direct poison in another! A blunder of this kind cannot be supposed to be corrected by an apothecary, whose business is to follow implicitly the prescription; but were it otherwise, as I am from the above instance persuaded it ought, he may be absent, and his inexperienced tyro may not always have so much faith in his own competency, to act beyond a certain sphere.

The *acetum distillatum* and *acidum acetosum*, both of the London Dispensatory, are admitted by this author as one and the same; the *acide acetique* of the French is likewise comprehended with the former. The *acidum aceticum concentratum* has but one solitary parallel or yoke-fellow, in *acetum radicale*. Here the author should have placed our *acid. acetos.* and the French *acide acetique*. What mischief may we not expect from such an arrangement of names! About four pages are dedicated to the *acidum aceticum*, and contain a jumble of about seven *formula*, in which it is difficult to guess whether a *distilled vinegar* or a *concentrated acetic acid* is to be produced; the last seems very obscure; *pure vinegar* to be distilled from manganese to form a *concentrated acid*.

Under the denomination of *oxyda metallica* are ranked the *scoriæ metallorum*; and, one would also suppose, the metallic carbonates; for with *oxydum ferri luteum* and *fuscum* the author classes both *crocus martis adstringens* and *aperiens*.

With *oxydum hydrarg. nigr.* our *hydrarg. cum creta* is placed, and *mercurius gummosus* is also added. Our *hydr. mur. mitis* is out of its place, and appears as if prepared by *sublimation*.

Carbonis and *oxydum zinci* are confounded both in this Pharmacopœia and that of the Edinburgh College; these are synonymized with very crude articles, such as *lapis tutiæ*, *lapis calamin. purificatus*, &c.

In this Pharmacopœia the word *stibium* is used throughout for *antimonium*. Many of the preparations from this metal are incorrectly and very carelessly detailed. *Tartris stibii* one would naturally conclude to be the exact parallel to *tartris antimonii* of *Pharm. Edinb.* but it is certainly not so, for the former is composed with *acid* of tartar only, and the latter with *cream* of tartar, or, agreeably to the ephemeral jargon, the *super-tartrite* of potash. So far the

the author, in *his* name, has acted consistently. There is, however, another preparation admitted, which is analogous to that of the Edinburgh Dispensatory, the emetic tartar of former date, and is called *tartaris potassæ stibiatus*; though, to shew the versatility of the new diction, another preparation, in which oxyd of iron enters, and is in all respects analogous, is called *tartris ferri cum potassa*. This, it may be insisted on, implies tartrite of iron merely *mixed* with some potash, and not a *chemical union* of three things. The same observation may be applied to other similar *formulae*, such as *oxydum stibii cum potassa*, for it is at best very ambiguous, since *cum* may signify either *with* or *by means of*.

The plan of the London College, though chosen perhaps inadvertently, seems better adopted to express a compound containing *cream* of tartar. Natron *tartarisatum*, antimon. *tartarisatum*, &c. might very well serve the present purpose, as *triple* compounds. As *binary* preparations, we might say *tartris*, or tartras (for this is also still indetermined) sodæ, or *tartris antimonii*, to shew that the *acid* of tartar only is employed.

Two methods are prescribed to make an oxyd of antimony (the *pulvis algoroethi*), and detailed with as much appearance of precision, and under two distinct heads, as if there was no similitude between them, being separated by three or four other *formulae*. One is *oxydum stibii album*, the other the same with *præcipitatum* added. In the first, it is one part of muriate of antimony to six or eight of distilled water; in the second there is a *quantum placet* to a *quantum opus*. These and many such proofs may be found in this dispensatory, that shew great carelessness and the slovenly want of attention that seems so generally to prevail. Indeed, a frequent occurrence of a *quantum satis, placet*, or *opus*, has but at best a very awkward appearance; and must always give one an idea of a closet-experiment.

By recent experiments it has been proved, that *animal bone*, that of quadrupeds in particular, contains *magnesia*; how far this may influence the nomenclature of our *pulvis antimonialis*, or of the improvement, the *phosphas calcis stibiatus*, I cannot determine. It is obvious, that not one of the modern Pharmacopœias contains a prescription for *pure phosphate of lime*; perhaps it may be unnecessary;—there has been, however, no attempt to try; and when it has been effected, we must be taught how it is to be *stibi-*
ated

ated and become, as in *Ph. Edinb.* oxydum antimonii cum phosphate calcis.

Under the title *alcoholata aromatisata*, the list of *synonyma* include what were formerly *spiritus stillatitii*, *aquæ spirituosæ*, *vinosæ*, and of course, the *spiritus anisi*, &c. of the London and Edinburgh dispensatories. Nothing can be more improper than this list; it had better have been omitted entirely; for it is worthy of remark, all the *alcoholata* are to be made with *rectified* spirit; and all the *synonyma* are composed with *proof* spirit of wine. To complete this part of the work, *alcohol camphoratum* stands first in the list, though the formula is inserted elsewhere.

Amongst a list of *aquæ minerales* are the *aqua barytæ* and *aqua calcis*. I should seriously hope a poison of such energy as *barytic lime-water* may never be suffered to hold such a denomination as a *mineral* water in the general acceptance of this title. If a mineral water be made artificially, it is merely with a view to imitate *Nature*; and it may be boldly asserted, that nature never produced an aqueous solution either of lime or barytes. Moreover, mineral waters, if not drank always as a common beverage, are generally taken more in an *ad libitum* way than one would dare to give this *aqua barytæ*.

If *acidum citricum*, or *oxalicum*, be approved, we should by analogy adopt *tartaricum*, and not *tartarosum*;—the same observation may be applied to *citras* and *oxalas*, which may very fairly include *tartras* in place of *tartris*.

There is a *suffis sodæ sulfuratus*, but no formula annexed to it: the source from which this is obtained proves it must be an extremely vague preparation, similar to *Bitnoben*, or to some such trash, and very unworthy a place in any dispensatory.

In more places than one, sulfurated hydrogen is rendered simply *gaz hydrogenæum*; and in the second process for *hydrosulfuretum ammoniæ* there seems a material omission: an acid is generally required to be added to sulfuret of potash, to disengage more effectually this gas. It is difficult to decide exactly the author's orthography of *sulphur*, whether he prefers it with *ph*, or an *f* only; perhaps I may have caught the contagion, and, confessing the effect it has, may also use both.

A solution of potash in water has nothing to distinguish it from one of the most potent caustics we possess. In this volume, *potassa* is followed by its supposed *synonyma*, in which are *aqua kali puri*, *aqu. lixiv. caustic.* and a few more of *liquid alkali*. In the present state of science,
potassa

potassa standing alone, must denote what the author does not mean to express, a *solid* simple substance. The danger might very easily have been obviated, *potassa aquosa*, or *soluta*, could not have lengthened it too much, in a work where the length of names have not been measured too sparingly.

From the second process to prepare *baryta*, one would imagine, by the "*unde acidum nitricum fugatur*," that nitric acid is not decomposed but evolved entire, and might be saved: this, however, is known to be otherwise; and that the acid is destroyed, the nitrogene and oxygene being extricated.

In *pilulæ hydrargyri*, I cannot discover whether each pill is to contain four grains of the *oxyd of mercury*, or four grains of the whole *mass*: if the former be meant, *fiant pilulæ quindecim* would have made it perspicuous; but if it be the *mass*, the prescription is very vague, and wants precision. I may here add, that unless *muriate*, *acetate*, *phosphate*, and the *tartrite* of mercury be equivalent to each other in strength, all that has been written respecting this pill the author should revise.

Acidum sulphuricum is accompanied by some instructions to purify it, which, if I mistake not, may render it very unfit for many purposes. The author says, "*Si heterogeneis inquinatum sit, ex retorta vitrea vel ferrea destillari debet, &c.*" I should suppose sulphuric acid cannot be rendered pure if it be drawn from an *iron* retort; it must be highly contaminated by *sulphurous* acid; its specific gravity much lessened, and part of the acid lost in forming sulphate of iron, by abrading the retort.

There is a singular *nota bene* attached to the *formula* for *acidum nitricum concentratum*. In order to purify this acid, so very essential to many of the most important operations in chemistry, which require it not only strong but pure; the author directs the usual stale method, to drop in nitrate of silver to separate muriatic acid. This we know will produce the effect, but requires great address to leave no nitrate of silver in the acid, which, by the way, is never *strengthened* by this addition.

The next task to be performed is, to drop into the same acid a solution of *nitrate of barytes*; and this we are advised to continue, "*donec nihil amplius præcipitetur*."—Now this I affirm to be a complete closet-experiment, or that the whole must have been penned and built upon theory: had the author been possessed of a few practical *præcognita*, he must have known better. Most of our
systematic

systematic books have retailed the same trite experiment; and, by trusting to some of these, our author has probably been deceived.

There never can exist any nitrous, or nitric acid, however pure, and even when perfectly freed from sulphuric acid, in which nitrate of barytes does not precipitate; and this precipitation will continue as long as we keep adding, till much more of the solution has been used than the quantity of acid it is meant to purify.

Besides this, would it not be highly absurd to add *concentratum* to an acid, into which so much *water* had been thrown?

That the *muriatic* of barytes is also equally insoluble in *muriatic* acid, was, I have reason to believe, first discovered by myself: both this and the above fact respecting the nitrate, with some other peculiarities of barytes, have already been communicated to the public, through the medium of the *Philosoph. Magazine*.

Some modern Pharmacopœias have certainly been compiled under a most baneful influence of innovation, and a strong propensity to instability, veering rapidly from one point of nomenclature to another; neither knowing where to stop nor where to begin.

It must generally be acknowledged, that even a trifling change in any pharmaceutic composition, whether it be in the name, process, or the proportions of its constituent materials, must, for the most part, be attended with at least some inconvenience, if not danger. These must of course be commensurate with the importance of such compound: thus, when *mercury*, *opium*, or *antimony* forms the predominant article, we should be more scrupulous to admit any deviation, than where less significant ingredients are employed.

I do not wish to be understood, as having given a decision upon all cases of disparity that occur in modern Pharmacopœias; nor to be considered as opposing the new nomenclature *in toto*. That there is much confusion in the present language; that it is often perverted; often, inconsistent with itself; full of ambiguities; very inadequate to the purposes of pharmacy; and evidently, from what has been said, perplexing to the pharmacopolist, are palpable truths, confirmed by daily experience.

Unwarrantable innovations and multiform titles are very incompatible with true science, and ought to be universally exposed and resisted. The length of some titles is preposterous beyond all bounds. Can we obtain an oil
from

from any other part of the fruit of the orange tree, that we must be constrained to say, *Oleum volatile corticis flavi citrus-aurantii*? Is there so much danger in retaining the *kermes mineralis* as to have recourse to *oxydum stibii hydro-sulfuratum rubro-fuscum*?

I do not profess to be one of those who look forward to, and are constantly endeavouring to cultivate, a kind of finical perfection in nomenclature: my opposition arises from more pure motives. My humble opposition is founded on a strong desire to stem this torrent of novelty; to lessen a number of notorious and dangerous blunders; to discourage subsultory editions of national pharmacy, while the storm of innovation continues; and to advise those whom it most concerns, either to retrace a great deal, if not the whole, of what has lately been promulgated, or rest on their oars till they can proceed with more safety and more propriety. I am, &c,

J. HUME.

Leng Acre, June 14, 1804.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

I Was much pleased with the communications respecting Gout in your Journal, but am very sorry for the unlucky turn they have lately taken. On this account many may doubt the propriety of further agitating the question. I am of opinion, however, that the subject is too important to be so dismissed, and that it presents a wide field for the exertion of ingenuity; nor do I see why it may not be discussed without animosity.

Your sensible and facetious correspondent, a *Constant Reader*, has, I think, properly counterbalanced the hyperbolic praises of the indiscriminate use of cold water to parts labouring under gouty inflammation; and it is to be regretted, that, as he seems capable, he has not attempted to draw the line, and fix the limits, to which the abstraction of heat from such parts may with safety and propriety be carried.

"That the gout is exclusively an inflammatory affection of the ligamentous and tendinous structure, that it is merely local and unknown as a constitutional complaint, &c." is an opinion

opinion that I think with you, Gentlemen, "*will meet with general opposition.*"

It does not, I think, admit of doubt that the inflammation of gout is as specific, that is, as much *sui generis* as that of scrophula, syphilis, or cancer; nor do I think it requires the power of divination to predict the fate of a theory supported on the above, I will venture to say mistaken, opinion. The spurious *left-handed* inflammation of erysipelas is very analogous to that which takes place in gout, and every practitioner must have met with cases of erysipelas, which have required the extremes of opposite practice, in proportion as the affection has occurred to a strong and vigorous, or a broken and debilitated constitution; and as the head or the extremities may have been the subject of the attack. One plan of treatment cannot be made applicable under all the varying circumstances of *any* disease; and least of all in such a one as the gout, which appears under such a variety of forms as to have given rise to so many different appellations, as *atonic, retrocedent, misplaced, &c.* Almost every particular case of this disease is an exception from a general rule, and consequently will require its appropriate mode of treatment.

For your number for October, 1802, I sent you a paper on the subject of this disease, which had then occupied for several years, and still continues to occupy, a considerable portion of my attention. On that occasion I alluded to diminished temperature, which has ever made a considerable part of my practice in the first attacks of the gout, and to the younger part of my patients, where the constitution and activity of the vascular system have been vigorous. On the contrary, experience warrants me in declaring, that an opposite treatment is necessary in the cases of old debilitated habits, where the powers of life are languid, and the excitation of heat small. In such cases, instead of interfering with the regular formation of the paroxysm on the extremities by the indiscriminate abstraction of heat, every mean ought to be used to establish it there by such applications as not only tend to retain, but even in many cases to increase the quantum of heat in such parts. And this is done with the view of preventing parts of more consequence from being attacked, not by a translation of matter, but in consequence of that specific relaxed state of the parts, which constitutes the gouty diathesis, and which, in my opinion at least, renders them incapable of resisting the increased action of the vessels arising from nervous irritability. Though I do not deny that

that many young persons, in whom the gouty inflammation (though widely different) approximates nearest to the common phlegmonous, may not only with impunity plunge their feet into cold water during a paroxysm of the disease, but even that they may frequently be relieved by doing so; yet this I strenuously contend for, that it is a practice fraught with mischief, if persisted in for a course of years. For, by accumulating the susceptibility of the parts, this practice in the first place not only renders the recurrence of the paroxysms more frequent, but subsequently lays the foundation of obstructions at an earlier period than would otherwise take place under a treatment that keeps the exhalents and absorbents of the parts in a state of greater freedom and activity.

As I have little leisure, I shall not enter farther at present into speculations on the subject; but after proposing to your ingenious correspondents the following questions towards a philosophical consideration of the subject, and pledging myself occasionally to take part in a *liberal* discussion of them, I shall proceed to state a few practical observations on the treatment of the disease.

First, I would ask the cause of animal heat in general? Secondly, The cause of the morbid excitation of it in a paroxysm of gout in particular? and Thirdly, Whether it be the cause or consequence of the paroxysm?

Though for the reasons above assigned, I am unfriendly to the application of cold water in a fit of the gout; on the other hand, I am no less so to the common mode of wrapping up the part in several folds of flannel. The true line of practice, as is usual in analogous cases, will be found somewhere between these two points; varying according to the peculiar state of the patient. A certain degree of heat is necessary to induce perspiration, which is generally allowed essential in promoting the most favourable solution of the paroxysm. We equally miss the true perspirable point, by covering the parts with many folds of flannel, and by immersing them in cold water. By the first we add greatly and unnecessarily to the present torments, and subsequent debility of the patient; by the latter we do no more than for the present almost extinguish the fire, by adding fuel hereafter to increase its heat.

As the gout appears to me a general and not a local disease, it follows that I cannot approve of local applications *only* for curing or preventing its paroxysms. Local applications ought to go hand in hand with general ones; and of the latter, gentle saline aperients and diaphoretics,

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I have uniformly found the best. I do not believe that hemlock, which I have seen used repeatedly, and the other narcotics, are entitled to the encomiums lately bestowed on them. In general, I find the best effects from doing something more than obviating costiveness with repeated doses of *magnesia vitriolata* and *magnesia alba* in peppermint water, carefully avoiding all irritation by carrying it so far as to purge, unless the excitement and heat of the system be very inordinate indeed. A grain or a grain and a half of *ippecacuanha* every six or eight hours, answers well as a diaphoretic. The temperature of the room and bed deserves much attention, as the excitement and generation of heat, except as before stated in persons in the last stage of life, require to be reduced rather than increased.

Sudden transitions from heat to cold, or cold to heat, ought equally to be avoided; and all changes of this nature should be brought about in the most gradual manner. The simple expansive power of heat is generally known. The mischief which must result from the sudden and alternate dilatations and contractions of the minute vessels of a part may be easily conceived.

With regard to external applications, none out of the many, which I have tried, have proved so generally effectual as steam, and occasionally confining the part for a while in a rarer atmosphere. I state this as a fact, the result of much experience; and apprehend, that this mode of treatment anticipates the tedious struggle which the parts affected must otherwise undergo, and disposes them to part with their heat, when excessive, more easily afterwards. This treatment not only has the happiest effects on the paroxysms while present, but renders subsequent ones more mild, and much protracts the intervals between them: and this in proportion to the prudent administration of it. I am much gratified in having possessed so much of the confidence of many judicious persons as to have enabled me to convince them of this truth; and I am little solicitous about others, who imagine that because they are not completely cured of the gout by two or three applications, they have given the plan a sufficient trial!!

I have several patients, who have by a steady use of the Air-pump vapour-bath every other or third day for a month at one time, and afterwards twice a week for the same period, and then by occasional applications, perhaps once or twice a month, have now been free from all appearance of gout for the last two years, and have not only enjoyed

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better general health, but have been competent to far more exertion than they had been for the two preceding years.

I beg leave to enclose you a letter of Dr. Stenhouse of Edinburgh, which I trust you will think deserving a place in your Journal: and I hope its having appeared in the Edinburgh Courant of the 9th of January last, will not operate as an objection.

“I have heretofore given some communications on the effects of ginger in the gout; and, although I have received much relief in the painful stage of that disorder, by the daily use of it for these three years past, yet the debility that followed was not less tedious; so that I continued my pursuit of something more efficacious, which I am hopeful I have at last found, and which I consider to be a duty to promulgate. Much have I thought for these eighteen years, and many an unintelligible page have I read upon this subject—but to come to the present question, since I am not writing a book. In the month of April last, a publication was put into my hand, which had escaped my notice, by a judicious acquaintance, to whom I am much obliged, entitled, “Facts and Observations respecting the Air-pump Vapour-Bath, in Gout, Rheumatism, Palsy, and other disorders, by Ralph Blegborough, M. D. Member of the Royal College of Surgeons, London;”—which apparatus, if it has all the effects ascribed to it, should be in every hospital and neighbourhood.—I was much pleased with the successful operation of this apparatus, because it confirmed an opinion I have long entertained, of the immediate cause of a paroxysm of the gout, for of the gout I am only speaking, that I was determined to try the experiment on myself the first opportunity, though on a more simple scale; my opinion will be elucidated by the following remarks and experiments.

“The immediate cause of all acute pain I take to be either *irritation* or *obstruction*; the latter is surely the immediate cause of a gouty paroxysm. To trace causes to their elements is but an uncertain pursuit, and cannot be attempted here. That this obstruction takes place in the minute branches of the arteries, I hold to be true; nor do I see any phenomenon in a fit of the gout, but what may be accounted for by this hypothesis. It will be easy to see that for the present I deny the existence of gouty matter; nor do I consider the earthy concretions formed in the joints, after repeated severe attacks, to be a proof of this, since

since the same phenomenon may be produced from the blood out of the body by a similar process. It is remarkable, that though much has been written on this subject, so little has been attempted, either to prevent the generating this disease, or mitigating the violence of its paroxysms. The reason of this I take to have been a supposition that there was something deleterious in the obstructed matter, and that it was unsafe either to prevent the fit, or tamper with the parts affected; of this prejudice I have had my share until within these three years. There is a prevalent opinion I know, with those unacquainted with the laws of the circulation of the blood, that there are applications, very improperly called repellants, which may drive back the gouty matter; but I tell my gouty readers, there is no operation can take place in the animal system in this sense; in fine, there can be no repellants, nor discutients, where there are no absorbents; but my readers must be cautious how they counteract the intensions of nature; or, if they must use the word, they must beware that by improper applications they do not *repel* the disposition of the system to produce a paroxysm, and thereby send it to some more vital part, which happened to myself the first symptom I had of this disease.

"I come now to describe my practice upon myself. I have already said, I took the hint from the Air-pump vapour-bath eight or nine months ago. The end of September last I was attacked in my right hand, but being in the country, I could not put my intentions in practice until I came home; by this time the fit had acquired its last stage both in pain and swelling. I then got a common tureen half full of boiling water; I laid my hand across, and covered it all over with some folds of flannel; but presently the steam was so hot, that I was obliged to reduce the heat of the water, so as to be able to bear the steam. In a few minutes the pain abated, and in about twenty-five minutes I was perfectly free from pain; and as the steam became so cold as to be no longer useful, I dried my hand and wrapt it up in flannel, and, had it not been for the swelling, I could have used it as well as if nothing had happened. About this time my right foot began to give me some symptoms of an attack; I allowed it to proceed for about 24 hours, until I was convinced it was to be a real fit. I then got a pail with two handles, and from the handles I suspended a towel to rest my heel upon; I then filled the pan with boiling water, so full as not to touch my heel, and covered it over with several folds of flannel for about

half an hour, as in the first experiment; I dried my foot, and wrapped it up in flannel; I was perfectly free from pain, and walked about the room as usual. I repeated this immersion five or six times this day and the following, since when I have had no complaint in my foot; but as I had only once immersed my hand in steam, in two days the pain returned, as if the obstruction had not been perfectly removed. I had recourse to the steam again, which I repeated two or three times. I have waited thus long to give a fair trial to its effects. I am still alive, and have been in good health ever since, though at the border of seventy.

"May I not fairly say, that here are two experiments, and what is more, at different stages of the paroxysms, which have been successful in removing the immediate cause, which I consider to be obstruction only, by the relaxing quality of the steam, or, what is the same thing, diminishing the pressure of the common atmosphere. Finally, I shall continue the ginger daily, and repeat the vapour bath when necessary; and if either stomach or bowels, or other viscera, should be attacked, I shall immerse my whole body in a hogshead of steam. To prevent the frequent return of the paroxysms, I live abstemiously, being certain that, in my case, the habit of body between repletion and inanition will conduce thereto; and such a state will be the most likely to prevent or mitigate diseases of any kind. If what has been said and done shall be thought erroneous, I shall kiss the rod of conviction."

"A. STENHOUSE."

The above led to a correspondence between Dr. Stenhouse and myself; the following I copy from one of his letters received the other day. "I fancy I shall shortly have to appear again in print, to contradict a false report, namely, that I have retracted my opinion of hot vapour, and that I have had a severe relapse."

It is beyond every thing gratifying to me, to have my endeavours approved by a person so well qualified by education, great attention to the subject, and personal feeling, to judge of them as Dr. Stenhouse must be.

I trust, Gentlemen, these observations will have a tendency to prove that,

"Est modus in rebus; sunt certi denique fines,
Quos ultra citràque nequit consistere rectum."

I am, &c.

RALPH BLEGBOROUGH.

Margaret Street, Cavendish Square, June 15, 1804.

CHEMICAL ANALYSIS OF A SWEDISH FOSSIL, *in which a NEW EARTH was discovered.* By Mr. KLAPROTH, of Berlin.

THE fossil which makes the object of the present examination is found in the mine of Bastnaos, near Riddarhytta, in the Swedish province of Westmannland. The first description of it is given by Mr. Cronstedt in the Transactions of the Swedish Academy of Sciences, 1751, where he considers it as a species of iron ore, which he names Tungstein; but according to the later researches of D'Elhuyar, it essentially differs from the true Tungstone or Scheele ore, and contains,

Lime	-	-	-	-	-	-	54
Iron	-	-	-	-	-	-	24
Siliceous earth	-	-	-	-	-	-	22

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To the authority of this analysis it is probably owing, that Mr. Kirwan refers it to his Ferricalcit. The fossil itself has a crimson colour drawing a little to pink brown, and it is found either massive or scattered in small pieces; on the fresh fracture it is faintly shining, rather a little fatty, and splits very finely. The fragments are angular and sharp edged; it is not transparent and makes a greyish white streak; its powder is reddish grey; it is half hard, brittle, and in a high degree heavy. The specific weight is, according to Cronstedt, 4,988, but after my researches, 4,660. In analysing this fossil I proceeded in the following manner.

I. 1. A piece of the fossil being put into a platina crucible and ignited in a red heat, lost about two per cent. of its weight, changing the red colour into brown.

2. One hundred grains of the levigated fossil were exposed in a platina crucible to a still stronger igniting heat, whereby the powder lost five grains of its weight, and became dark brown.

II. One hundred grains were mixed with two hundred grains of carbonated kali, and ignited in a platina crucible. The mixture would not melt, but came out of the fire as a very brittle red brown mass, which was triturated and washed with boiling water. The lixivial liquor passed through the filtrum without colour, and it remained also clear, on being neutralized with nitric acid, which showed

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that

that the fossil contained no Scheele oxyd. No trace of its containing an acid could likewise be discovered by the solutions of silver, mercury, lead, iron, or barytes. The powder which had been thus sufficientlyedulcorated, was digested with nitric acid, and after the siliceous earth had been separated, a solution of caustic kali was added, and the liquor kept boiling. When I had separated the alkaline liquor by the filtrum, I neutralized it with muriatic acid, and mixed with it carbonated kali, but no precipitation or turbidness ensued.

III. 1. Two hundred grains of the levigated fossil were digested in the boiling heat with two ounces of muriatic acid, to which was afterwards added one ounce of nitric acid. After the whole quantity, except the siliceous earth, had been dissolved, the liquor was filtrated, and the remaining siliceous earth being washed and ignited, weighed sixty-eight grains.

2. The straw-yellow solution being neutralised by carbonated ammonia till it became no more turbid, was mixed with succinate of ammonia, and every time this was added a white caseous precipitation was occasioned, which on stirring the liquor disappeared again, and only a pale red precipitate of succinate of iron was deposited. The precipitation of the last substance being carefully finished, it was collected, washed, dried, and strongly ignited. The oxyd of iron thus obtained weighed nine grains.

3. The clear solution, after being entirely freed from iron particles, was precipitated by carbonated ammonia, whereby no disengagement of gas took place. The precipitate being collected,edulcorated, and dried, had the appearance of a loose milk-white powder which weighed 168 grains. After it had been deprived of the carbonic acid and water, it appeared with a cinnamon colour, and its weight was now 109 grains.

4. The liquors used for theedulcoration were evaporated, and the ammoniacal neutral salts that were obtained, being volatilised at a moderate heat, only a small trace of muriatic neutral salt was left behind.

From the subsequent examination it will appear, that the earth, which makes the principal constituent of that fossil, essentially differs from any of the known earths in several properties, on which account I consider it as a *new earth*, or an earth of its own, unless we are informed of the contrary by future experiments. The characteristic property of this earth to receive a light brown colour by
2
ignition

ignition has induced me to give it the name of *Ochroït earth* (*Ochroïta*) which is derived from the Greek word *οχρος* (flavescens) and to the fossil itself the mineralogical name of *Ochroïtes*.—100 parts of this Ochroïtes have yielded,

Ochroït earth,	III.	3,	-	-	54,50
Siliceous earth,		1,	-	-	34,
Oxyd of iron,		2,	-	-	4,
Water, &c.	I.	2,	-	-	5,
Loss			-	-	2,

100

The properties of this new earth are the following.

1. The Ochroït earth, on being precipitated from acids by carbonated alkalis, absorbs part of the carbonic acid, and on being dried it imbibes water; 100 grains of this earth precipitated by carbonate of ammonia, and dried, lost 23 grains when saturated with nitric acid; 100 grains of the same earth lost by ignition 35 grains, consequently the proportion is, in 100 parts,

Earth	-	-	-	-	65
Carbonic acid	-	-	-	-	23
Water	-	-	-	-	12

100

2. When freed from water and carbonic acid, the earth shews always a cinnamon colour, which is not produced either by iron or manganese particles.

3. When exposed to the heat of a porcelain furnace in a charcoal crucible it is not in the least altered.

4. It glows before the tubus fusorius with a luminous appearance, but is not dissolved by borax, and merely mixed with it, by which it loses its particular colour.

5. The carbonated earth easily dissolves with effervescency in acids, and the taste of those solutions is astringent. When diluted the solutions appear without colour, but in a concentrated state they receive an amethystine colour. The ignited earth however is slowly soluble by acids in the cold, and the solutions, particularly that with nitric acid, appear with an orange colour, which disappears on diluting them with water.

6. The solution of this earth in sulphuric acid crystallises; the crystals which appear in the middle of the vessel seem to be octaëdrous, and are of an amethystine colour, and with difficulty soluble in water; whereas those

F 4

which

which are formed on the sides of the vessel appear in radiant needles, and dissolve much easier in water.

7. On adding a saturated solution of sulphat of soda to a concentrated and neutralized solution of the earth in nitric or muriatic acid, both solutions are decomposed, and a white precipitate, with difficulty soluble in water, is formed, consisting of a combination of the earth with a small portion of sulphuric acid. By boiling this precipitate with double its weight of carbonat of soda, the earth will be separated in a carbonated state, and by means of this proceeding it may be obtained pure, and freed from any heterogeneous mixture.

8. Sulphurous acid easily dissolves this earth, and yields needle-like crystals of a pale amethystine colour.

9. The solution of this earth in nitric acid has little tendency to crystallization.

10. The muriated solution however yields prismatic crystals which are soluble in spirit of wine, to which, when burning, they impart no particular colour.

11. The solution in acetic acid gives no manifest crystals but rather coagulates to a thick mass.

12. It is precipitated from its solution in nitric and muriatic acids by carbonated alkalis with a milk-white colour, which however becomes greyish-yellow, when the earth is precipitated by caustic alkalis.

13. The prussiate of kali precipitates this earth from its neutral solution with a milk-white colour, and the precipitate makes a clear solution with nitric and muriatic acid, but when the earth contains a trace of iron the solution gets a bluish tint.

14. Tincture of galls produces no change, as likewise water impregnated with sulphurated hydrogen.

15. The succinats precipitate the earths in white flakes.

16. Phosphat of soda produces a white precipitate which disappears on adding nitric or muriatic acid, which is likewise the case with tartrit of kali.

17. A considerable precipitate is also effected by oxalic acid and oxalata. The oxalat of Ochroit earth, which is thus produced, differs from the former precipitates by being insoluble in nitric and muriatic acid, whence a nearer affinity of the oxalic acid to the Ochroit earth is evident.

18. Fixed alkalis have no action on the Ochroit earth, and do not dissolve it.

19. Ammonia acts under certain circumstances on this earth, but in a weak degree. A solution of 100 grains of carbonated earth, which however seemed not to be entirely free

free from iron, was precipitated by carbonat of ammonia, and at the same time supersaturated with it. A few days after, during which time the liquor was frequently shaken, it was separated by the filtrum, perfectly saturated with sulphuric acid, and exposed in the warmth. It became turbid, depositing a grey precipitate, which, collected and dried, weighed $1\frac{1}{4}$ grains. It was dissolved in nitric acid, and mixed with prussiat of kali, whereby a precipitate of prussiat of kali was produced, after the separation of which the carbonat of kali precipitated a small portion of the earth in white flakes from the rest of the liquor. This proceeding may be employed to discover and to remove the least trace of iron.

According to these results the Ochroït earth comes near to the gadolin or ytter-earth, as it makes, like this earth, a transition of the simple earth to the metallic oxyds. The properties in which it agrees with ytter-earth consist in forming reddish crystals with sulphuric acid, and in being precipitated by prussiats; but it differs by having no sweet taste when combined with acids, and by being only weakly acted upon by carbonat of ammonia, and by appearing with a light brown colour, when ignited; farther, by not dissolving in borax or in phosphates before the tubus fusorius, whereas ytter-earth melts with both to a clear pearl.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

MR. CUMING has, as he is justly entitled to, the best thanks of Academicus for his obliging reply, (p. 518 of your 11th volume, to the case stated, p. 461 of the same.) It was before omitted to be noticed, that about the middle of the day, and before dinner, immediately preceding the first day of manifest illness, that is, on the Monday, and before his dinner, the child had suffered a fall of a very few inches, with his whole weight upon his belly, over the knee or thigh of rather a careless or hasty handler, who had so lifted him for the purpose of wiping the soles of his shoes which he had wetted in the grass. But, as the child did not immediately cry, and his body with instantaneous elasticity of the abdominal parts rebounded upon the knee or lower part of the thigh of the handler, who was standing with the left foot upon a step of twelve inches

inches above the right foot; and as also, after being loos-
ed, the child went away, and whined but for a very little
while, only small and temporary hurt was believed to have
been occasioned to him, rather towards the left part of the
abdomen, by the indiscreet lifting; which was therefore
forgotten for the time.

Animadversion on the treatment will afford pain to those
who have witnessed both the knowledge and the judgment
of the practitioner in other cases; but, the apothecary
certainly expressed an opinion, that if cold had been the
cause of the illness, it would have been indicated by a
cough. He also sent the saline mixture on the Wednes-
day, or, at first, to remove the fever, and not for sickness
at the stomach, the appearance of which had been very
trifling indeed. The fever seemed to have spent itself in
its own violence during Wednesday night, and next morn-
ing it was gone, in consequence of the saline mixture, as
the apothecary expressed his opinion: but coma appeared
to have already ensued, at least as one not of the faculty
thought. Great debility and much sleepiness had certain-
ly then already ensued; and the apothecary, on his com-
ing, consented to the physician being called in.

No less splendidly expressed than true is the sentiment
which Mr. Cuming has delivered in the last sentence of
page 520; and the sentence that immediately succeeds it,
and closes his letter, induces me to state, that the head of
the child was remarkably large, very thinly covered with
hair, the seams imperfectly closed, the occiput extended
horizontally, but terminating in a conformation almost
perfectly hemispherical.

But notwithstanding the largeness of the head, and the
peculiar extension of the occiput, the child's health had
always been good, excepting an illness from which an
emetic had relieved him about a year before; he was ro-
bust, active, and occasionally sprightly; at other times he
appeared heavy, which was imputed to the size of his
head. Two days previously to his last illness, that is, on
the Sunday, he had eaten a small, but of course heavy,
mince-pye. At the age of three months he passed an easy
vaccination, which at six months more was proved good
by variolous inoculation. His temper and manners were
uniformly easy, quiet, and engaging.

Further Observations upon the case, either from Mr.
CUMING, or from any other gentleman of the Faculty,
would be an additional favour conferred upon,

Your's, &c.

June 16, 1804

ACADEMICUS.

CRITICAL ANALYSIS

OF THE RECENT PUBLICATIONS ON THE

DIFFERENT BRANCHES OF PHYSIC, SURGERY,
AND MEDICAL PHILOSOPHY.

Observations on the Treatment of Scirrhus Tumours and Cancers of the Breast. By JAMES NOOTH, Surgeon Extraordinary to His Royal Highness the Duke of Kent, &c. &c. Octavo, pp. 101. Bath, 1804.

AFTER an historical introduction, the author commences his observations with an anatomical description of the breast, and particularly those parts in which cancer originates; he then explains the appearances and symptoms of the incipient disease, and its usual progress. The experiments he tried on himself by inoculation with diseased fluids, are a sufficient proof of the intrepidity of his investigations. He next proceeds to mention the different kinds of treatment which have excited the hopes of practitioners for a time, but which have been found ineffectual on more extensive experience. Among these, *cicuta*, *mercury*, *antimonials*, *flores martiales*, *belladonna*, *solanum*, *arsenic*, and *electricity* are mentioned, all of which, particularly the last, have been useful in tumours of the breast, though they will not cure cancer.

Mr. N. then examines the question, whether scirrhus affections proceed from any predisposing state of the constitution or from accidental causes, and determines in favour of the latter opinion, and on this determination he properly founds the importance of extirpation. A minute account of the operation follows, with the subsequent treatment and observations on the *prognosis*; to which are subjoined, a number of cases to confirm their utility and propriety.

The author concludes his truly practical pamphlet with the means of alleviating those cases of open cancer which cannot be relieved by the foregoing methods.

“ Strumous swellings of the breast, and small encysted tumours, are easily distinguished by surgeons. Indeed, it seems barely possible to mistake those affections for scirrhus tumours, all attendant symptoms being duly considered.

“ The advanced stages of cancer, where ulceration has taken place, become extremely painful to the miserable patient, and resist the most rational treatment which can be suggested by medical skill or surgical assistance. A proper attention to such diet as will not stimulate must be paid, and the bowels should be kept, by
gentle

gentle means, moderately lax; opiates in small doses, and frequently given, will procure *temporary* relief. No dressings, I think, yet employed by our best surgeons, have been found to be of essential service; but such as do not stimulate, yet exclude the atmospheric air, seem best calculated to avoid irritability; and it is always necessary to keep the sores as clean as possible.

"No attempt to restrain fungous excrescences can be made without exciting, *in some degree*, irritability; therefore such as are most gentle in their effects should be preferred. These circumstances are more obstinate and distressing than any others with which a surgeon ever has to contend. He might, *in a slight degree*, palliate distress, but cannot remove it.

"I shall now," says Mr. N. "with much satisfaction, offer the result of some experiments with the carbonic acid gas on cancerous ulcers of the breast. I am aware that this gas has been employed for the same purposes by many gentlemen of the most respectable abilities; but, I trust, the mode of application here described, will be found more effectually convenient than any other hitherto adopted.

"A poor woman was my patient at the Infirmary, and a general consultation was held on her case; when we were unanimously of opinion, that no relief could be obtained by extirpation. I therefore proposed the application of the carbonic acid gas to the ulcer, as it might probably afford some mitigation of her sufferings; which idea was warmly supported by Dr. Ewart, and readily acceded to by the other medical gentlemen.

"On the following day, Mr. White, apothecary to the Infirmary, happily conceived a plan for keeping it always in application with the sore, by means of a small bladder, which was to be affixed to the breast by *sticking plaster*. The neck of the bladder was cut off, so as to make a circular aperture into it, of such dimensions as to correspond nearly with the size of the ulcer of the breast. A round hole of the same size was cut in a piece of soft leather, spread with adhesive plaster, and large enough to surround the ulcer. The cut end of the bladder was introduced through the hole in the leather, and its edges folded back and stuck to the plaster on the opposite side, forming somewhat the shape of a round hat, the plaster resembling the rim, and the bladder, when distended, the crown. In order the more effectually to secure the attachment of the bladder to the plaster, and to make it air-tight, the end had cuts round it half an inch deep, and as much from each other to make it sit smoothly; and narrow slips of plaster were applied round their junction, both within and without. The large plaster was then fixed on the mamma, the aperture in its centre, with the bladder fixed to it, being placed exactly over the ulcer, no part of which was touched by the plaster. A small orifice was made at the fundus of the bladder, sufficient to admit a tube of about a quarter of an inch in diameter, which communicated with the top of an inverted cylinder, suspended upon water, which cylinder was filled with carbonic acid gas. The bladder being closely squeezed,

to

to expel the atmospheric air it contained, and the above mentioned tube being inserted into the orifice formed to receive it, and tied by a ligature passed over the bladder, the inverted cylinder was pressed down in the water, so that the carbonic acid gas was made to rush through the tube, and distend the bladder, which was tied above the tube, to prevent the escape of the gas. As soon as the bladder was collapsed, so as to shew that much of the gas had evaporated, it was filled in the same manner as before; and this operation was repeated twice or three times a day, as it appeared necessary.

"It is a proof of this simple apparatus fully answering its purpose, that the bladder, when filled at night, was found to contain a considerable quantity of the gas on the following morning. When the carbonic gas was thus applied to the sore, it first occasioned a sensation of coldness, which lasted for a few minutes, and was afterwards succeeded by a glowing warmth, which continued more than half an hour; the same sensations were uniformly expressed by the patient after each successive application of the gas."

Medical Sketches of the Expedition to Egypt from India, by JAMES M-GREGOR, A. M. Member of the Royal College of Surgeons, Surgeon to the Royal Regiment of Horse Guards, and lately Superintending Surgeon to the Indian Army in Egypt.

UNDER the title of Sketches we have the history of the diseases of the army which came from India to co-operate with the English Army in Egypt.

After remaining very healthy during a long period on ship-board, and after a very perilous navigation of the Red Sea, the Indian Army, consisting of about 8000 Europeans and Sepoys, landed at Rossier on the western shore of the Red Sea. In going from Rossier to Ghenné on the Nile in Upper Egypt, the Indian Army nearly followed the route travelled and described by Mr. Bruce.

From the want of water, from the intense heat, and from the hot winds, this march of an army, across the greater Desert, must have been attended with many difficulties. From Ghenné the army marched to Girge, the capital of Upper Egypt, was there embarked in boats, and after a navigation of nearly 400 miles, reached Cairo in August 1801.

Mr. McGregor, the Chief of the Medical Department of the Indian Army, informs us, "From the nature of the prevailing diseases, the campaign in Egypt was, in a particular degree, a service of danger. To their regret, the Indian Army arrived too late in Egypt, to share in any other dangers than those arising from the diseases of the country; and here the medical gentlemen had the post of honour. Intrepidity is more a military than a medical virtue; but seldom, I believe, has there been a greater display of it, than

than among the medical officers in Egypt, whose duty it became to reside in the pest houses."

To shield him from the severity of criticism, Mr. M'Gregor offers this ingenuous apology for his authorship; it weighs with us, and we doubt not it will with readers in general, "The life of a medical man in the army is at no time very favourable to literary pursuits; mine has been peculiarly unfavourable; and I have had little time or opportunity, since I first entered the army, to attend to the ornaments of diction. For the last fifteen years of my life, mostly spent in the East-Indies, West-Indies, or at the Cape of Good Hope, sometimes at sea, sometimes on land, my time has been occupied in a laborious attention to my duty in the army."

Of three parts, into which this work is divided, the first gives the history of the expedition, the second treats of the causes of the diseases, and the third gives the history of diseases.

In assigning the causes of disease, Mr. M'Gregor expresses his confident hopes, that the modern chemistry will unfold many of them to us. Mr. M'G. we presume, was in India when he wrote his book; he seems equally sanguine on this subject, as many ingenious men in this country were some years ago.

The author adduces a particular instance of a fact which we are assured holds generally good, "That heat, though the degree of it be very considerably increased, unless combined with intemperance or some other cause, is very rarely the exciting cause of disease. At Rossier, and in crossing the desert, the degree of heat was very great, and both the officers and men, from Madras as well as Bengal, complained that it was more unsupportable than they had ever felt it in the hottest seasons. Yet, at the above period, the army enjoyed an uncommon degree of health, though they necessarily were much exposed to the sun: but their minds as well as their bodies were at this time exercised. Not only on crossing the desert, but for some time after we reached the Nile, at Ghenné, we all believed, that we were in the neighbourhood of a division of the French Army, and the Indian Army was for some time kept in the constant hopes of being engaged."

The chapter on the plague is the most valuable in the book, Mr. M'G's remarks are of the most consolatory nature; much, he thinks, may be done in the treatment of the disease, and every thing in the prevention, which in the Indian Army appears to have been attended with the most complete success. He remarks, "In Europe, but more particularly in Britain, much of the dread, and much of the real danger, that attended the most fatal diseases in this country are now done away, by the late improvements in medicine and in chemistry.

"The time was, that fever, when it broke out in different parts of England, proved little less fatal to whole villages and towns than the plague does in the countries where it resides. From the improved practice of the treatment of fever, but more from our knowledge of the means of destroying contagion and preventing its
spreading

spreading, the mortality from this class of diseases is now comparatively small. The small pox, that plague which once carried off so great a proportion of the population of Europe, now bids fair to be expunged from the catalogue of diseases. May we not indulge a hope, that, as the intercourse of civilized Europe with the countries of which the plague is now the scourge, becomes more regular and intimate, we may be enabled to extend to them our discoveries and improvements, and so direct them to the means of divesting the plague of its terrors, and reducing the mortality from it to the scale of that of fever and the small-pox in Europe." He brings testimony of the good effects of the nitrous fumigation. From the reports made to the author by the surgeons of the Indian Army, it appears that the treatment with mercury and nitrous acid was by far the most successful.

On the ophthalmia of Egypt, Mr. M'G. gives strong evidence of the disease being communicated by contagion, and he entertains the same opinion of Guinea-worm. This, to us, appears strange; but we recommend Mr. M'G's curious chapter on the subject. His experience in liver complaint, dysentery, and fever, appears to have been extensive in every part of the world, and he extolls nitric acid, and the new remedies, equally in these diseases as in venereal complaints. We suspect that a short residence in England will convince Mr. M'G. that his opinions on these remedies are now old fashioned.

Some cases of tetanus are adduced, which Mr. M'G. treated successfully with the warm bath and mercury, and the volume concludes with some remarks on the yellow fever, and a table of the points of resemblance between that disease and plague. On this part much is not said, the subject is barely broached; but it opens a mine of the most curious investigation, and we doubt not it will be pursued. Mr. M'Gregor was, perhaps, the first who had extensive experience of yellow fever and of the plague, the two most fatal diseases that afflict mankind; and he hints that he is in possession of ample materials to have enlarged this volume.

Cases of Small Pox, subsequent to Vaccination, with Facts and Observations, read before the Medical Society, at Portsmouth, March 29, 1804. Addressed to the Directors of the Vaccine Institution. By WILLIAM GOLDSON, Member of the Royal College of Surgeons, in London. Portsea, 1804, pp. 71.

THE importance of every document relating to Vaccine Inoculation, and the interest which the very title of the pamphlet before us cannot fail to excite, will justify us to our readers in giving its contents somewhat at large. This we shall do in the order in which we find them in this treatise, which, previous to publication, was read before the quarterly meeting of the Medical Society of Portsmouth, Portsea, and Gosport, March 29, 1804.

The medical men of this town and neighbourhood, it seems, have had

had some little imputation thrown on their professional zeal, from the tardiness with which they adopted vaccine inoculation, considering their proximity to the metropolis, and the ready communication with the head quarters of medical science which this part of the kingdom cannot fail to enjoy.

Vaccine Inoculation was even at last introduced in this place, according to Mr. Goldson's account, by *authority*, some matter being first sent by the Sick and Hurt Board (obtained we believe from the Vaccine Pock Institution) in the autumn of 1800, to Mr. Rickman, Surgeon of Marines, at Portsmouth, with instructions to try its efficacy on such recruits as had never had the small-pox. From this source Mr. G. first inoculated patients in November of the same year, and the practice soon spread pretty generally over the neighbourhood.

The date of the first inoculation at Portsmouth, (three years and a half from the present time) is surely a sufficient plea to exculpate the medical public of this part of the kingdom from any serious charge of indifference to professional improvement; nor is the plea much strengthened by such arguments as the following.

"The doctrine of the cow-pox was known to them soon after its promulgation. They attended to it with a desire to make themselves masters of the subject. At the same time, they could not remain ignorant of the many instances of failure, which occurred in its infancy. Neither could they help remarking, what must have been obvious to every attentive observer—the apparent instability of the practice. With every fresh instance of a spurious case they heard of new instructions and cautions in respect to taking the matter. These instructions deviated occasionally, from the 13th down to the 7th or 8th day; and yet they were told, that on this point depended the whole success of the operation. Besides, their local situation prevented them from having any opportunity to see the disease. Common prudence therefore, in a case so important, dictated, that they should not rashly venture on a practice, so seemingly replete with difficulties, the detection of which wholly depended upon experience alone. The vaccine pustule had not been seen by any of them, except in the representation of an engraving. Although those engravings were, most assuredly, very accurate, and the instructions equally explicit; yet, it must be acknowledged, there are many casual circumstances in pathology, which neither engravings nor instructions, however accurate, can convey a perfect idea of, and which can only be obtained by clinical attendance."

Spurious cases, fatal cases, and instances of failure, have been uniformly reported from the beginning of the practice to the present instant, and the opinions of experienced inoculators (as far as a very few years can give experience) have been constantly and are still at variance as to the time of taking, and mode of preserving matter.

Had these circumstances therefore been deemed of sufficient importance,

importance to delay the introduction of the new practice, it would still have been unknown and untried in this as in every other part of the country distant from the spot where the first experiments were made. The want of personal experience is a still more singular cause of hesitation, when the descriptions of the disease, both by writing and engraving, were confessedly accurate, and only deficient in "certain casual circumstances in pathology," which could not be known but by multiplied experiments, carried on by men of talents and observation in every variety of situation. Where was the personal experience of those medical men, (many of them in no respect inferior to the Portsmouth practitioners in sound judgement and prudent caution) who did not hesitate to begin vaccine inoculation with no other materials than the publications of Jenner, Woodville, and Pearson, and a few glasses of vaccine matter?

But to proceed with the author's cases.

The first case is the child of Mr. Grant, who was inoculated with cow-pox in October 1800, by Mr. Paytherus, and again inoculated in December 1803, by the author, with small-pox matter by way of proof of the efficacy of the first inoculation, which was acknowledged by Mr. Paytherus to be in every respect the regular vaccine disease. The variolous inoculation produced an inflamed pustule of an ambiguous appearance, which for six days was unattended with fever though the local inflammation was considerable, so that the author at first considered it as "a strong effort to produce small-pox," but no more. But on the eighth day the symptoms became more marked.

"Immediately on seeing the arm however on the next morning, Monday the 26th, I observed a visible alteration. The suppuration was manifestly increased. The areola was become extremely florid, and radiated, so as to be much less circumscribed, than it had hitherto been, bearing evident marks of absorption. The child was pale, not warmer than usual, but its pulse were quicker than they should have been, or than they ever had been before.

"These observations I kept to myself, as I perceived the anxiety of the parents led them to watch me with an inquisitive eye. But when I asked them, whether the child had been ill during the night, or whether they had observed any kind of appearance on the body, they instantly shewed me six or seven eruptions. Three of them were on the forehead and temple, one on the right ala of the nose, one on the opposite shoulder, and one or two on the breast. The child had been rather feverish during the early part of the night with restlessness, and according to the servants account transiently delirious.

"In the evening I was sent for in haste. I found it had been seized with a violent rigor, from which the attendants had, with difficulty, recovered him by warm wine and flannels. When I saw him, he was in a high degree of fever, his countenance much flushed, and there was a considerable efflorescence on both arms. It had the same characteristic appearance as the rash, which is
(No. 65.) G frequently

frequently seen in inoculated small-pox. Two or three eruptions, of the same kind as those seen in the morning, were readily distinguished through the efflorescence. The degree of fever was so much, that I thought it necessary to order some medicine to abate it, with a gentle anodyne to allay the irritation."

After this the fever abated, and in a few days the eruptions disappeared. The disease was considered by several medical gentlemen in the neighbourhood as well as by Mr. Goldson, as decidedly variolous.

This case gave rise to some correspondence with Mr. Paytherus, who had vaccinated the child, with Dr. Willan, and Mr. Ring, who agreed that the second disease was *not* the true small-pox, but an anomalous train of symptoms induced by irritation of the skin from the introduction of variolous matter, and which may happen at any time to persons who have already had the small-pox.

The second case is that of a child vaccinated in December 1800, and exposed to small-pox in February 1804, not by inoculation but by contagion, sleeping with another child under variolous inoculation. On a Thursday some time after this exposure the vaccinated child was attacked with fever, which continued till Sunday, when seven distinct eruptions appeared on the face, neck, and arms, which were pronounced by three respectable practitioners in Portsea to be decidedly small-pox. The eruptions continued five days but never matured.

Mr. G. remarks, that here they were not attended with rash, and that in this respect the similarity to small-pox is as remarkable as in the former case, the natural disease being less frequently attended with efflorescence than the inoculated.

The third case is perhaps the most important. An infant was vaccinated in January 1801, went through the disease regularly, and matter taken from the same was employed with success to vaccinate another child, who has proved its efficacy by resisting small-pox repeatedly. In April 1803, the former child was exposed as much as possible to the contagion of small-pox, and completely resisted it. On March 1804, Mr. G. was desired to see the same child, who had then several eruptions on the body. Their history was the following.

"Not having been called early enough to witness the beginning and progress of the disease, I was the more particular in my inquiries. This I found was the fourth day of the eruption; she was taken ill on the Wednesday evening preceding, complaining of sickness, pain in the head and back, accompanied with considerable fever. On Thursday and part of Friday, she continued nearly the same. Supposing it to arise from cold, the mother was not alarmed, but gave her some diluting drink, and kept her in bed. About Friday noon she began to be better, but not totally free from fever. On Saturday morning she was perfectly recovered; but while she was dressing, a few eruptions were perceived in her face, neck, and shoulders, but were not much attended to at the time. On Sunday the

the number increased, and still more came out on Monday morning. They now began to consider them as something more than pimples. For the first time they suspected small-pox. In this they were justified, from variolous infection being in the school; two or three other children having taken it, one of which died, in a confluent sort, under my care soon after. This induced them to send for me.

"In a case so important, I should not have been justified in trusting to my own opinion. The case was therefore seen by Dr. Kerr of the Military Hospital, Dr. Thompson and Mr. Stevenson of Haslar, Mr. Rickman of the Marine Infirmary, Mr. Taswell and Mr. Merritt of Portsmouth; and by Mr. Gaselee, Mr. Hill, Mr. Seeds, and Mr. Weymouth of Portsea; all of whom expressed themselves perfectly satisfied of its being small-pox. Mr. Wilkinson of Portsmouth likewise saw the child, but entertained some doubts from the pustules drying off early on the seventh day. These doubts were removed however by the subsequent experiments."

The subsequent experiments were the following: Four children were inoculated by different practitioners with matter taken from the pustules of the abovementioned case, and with the following result.

"My own patient was a delicate child, about six months old. It had considerable fever and rash, which was preceded by two or three convulsions. The rash subsided about the usual time; when I could not discover more than eight or ten eruptions; four of which matured, and went off on the seventh day.

"The child which Mr. Weymouth inoculated was ten months old. It had about fifty eruptions, most of which matured kindly, and went off about the same time.

"The child upon whom Mr. Cooper tried the matter, was nearly of the same age. It was followed by more than a hundred pustules, which, like the former cases, went off on the seventh day.

"Mr. Seed's patient was a strong plethoric child at the breast, seven or eight months old. This child had considerable fever, with extensive rash, and more than a thousand pustules; most of which did not turn until the ninth or tenth day."

These cases being selected for the express purpose of experiment, were attended to by most if not all of the gentlemen who had visited the former case, and all were perfectly satisfied of their being variolous.

The above are the Author's cases; two others, attended with similar results, are given from the authority and personal observation of Mr. Weymouth of Portsea, in which, after satisfactory vaccination, a subsequent inoculation of small-pox produced fever, a regular pustule at the inoculated part, and in one of the cases a pustular eruption containing a virus, which by farther inoculation was found to produce a disease in every respect similar to genuine small-pox.

The author then enumerates the circumstances which have decided to his entire conviction the two great questions implicated in

these cases, namely, whether the first inoculation produced the genuine and perfect vaccine disease, and whether the subsequent disease acquired from small-pox patients, either by inoculation or by contagion, was true and complete small-pox.

The original source of the vaccine matter sent to Portsmouth appears unexceptionable. It was transmitted by the Sick and Hurt Board for the express purpose of experiment; the persons inoculated therewith, exhibited a well-defined pustule with all the characteristic marks of cow-pox, leaving a permanent scar, and rendering the persons thus affected, *for a time*, not susceptible of small-pox infection either by inoculation or contagion.

In answer to the question, whether the subsequent disease in the cases above mentioned was genuine small-pox, the author gives the following statement.

“ Respecting the small-pox in Case II. Worsfold's child :—

“ 1. Three years and three months after vaccination, she was exposed to infection from a child in the same house, who was inoculated for that disease.

“ 2. There appeared seven or eight eruptions, attended with all the symptoms which usually precede, and accompany small-pox, exactly at the period when such infection might be expected to take place. They went off in a few days without maturing, as frequently happens in the inoculated disease.

“ Respecting the small-pox in Case III. Luscombe's child :—

“ 1. Three years after vaccination, she was exposed to variolous infection, in a school where several of the children were taken ill of that disorder, one of which died of it under my own care, and three others, as I have been informed, experienced the same fate.

“ 2. There was an eruption of above a hundred pustules, attended with the usual symptoms of small-pox, some of which fully matured, and continued to the seventh day, the others going off rather earlier without maturation, as frequently happens in distinct warty small-pox.

“ 3. Matter taken from these pustules communicated the small-pox to four patients, under four different practitioners. In that under my own care, it produced but a few pustules, in two other cases, from fifty to a hundred, and in the fourth, above a thousand, accompanied with protracted disease. In all of them the pustules corresponded exactly with those of genuine small-pox. Therefore in both the subjects of Case II. and III. I consider the disease to be truly variolous.”

The above is an abstract of the Author's evidence of the insufficiency of common vaccine inoculation; the entire Pamphlet claims an attentive perusal from all the partisans, friends, and well-wishers of Dr. Jenner's discovery.

Among the objections that have at various times been brought against vaccination, its insufficiency for permanent security has been sometimes urged, but no very precise attempt had been made; we believe, to give this opinion the support of actual experiment, before the cases related in the present publication.

The

The promoters of vaccination, after having quieted the scruples of the hesitating wavering parent on the supposed risk to life by cow-pox inoculation, the probability of introducing foreign disease, and the general security against future small pox, must often have heard the question, "How do I know that my child is secure for life? Will it not be necessary to re-inoculate him every three, four, or five years, to preserve in his constitution the same power of resisting small-pox infection?" Medical men have hitherto not scrupled to answer to such objections, that the strong analogy of cow-pox with the disease which it prevents, renders it highly probable that the security it affords from future infection, remains for life precisely as complete as immediately after inoculation: that, as it is the regular progress of small-pox inoculation, and not the quantity of disease, which ensures the future safety of the patient, so it is highly probable that the same law of the constitution obtains in vaccination; and especially, that positive experience proves that in casual vaccination, or wherever it is taken immediately from the cow, a lapse of many years, of half a century, in no degree diminishes its preservative power. Moreover, as it has never been pretended that the vaccine inoculation was in point of security from future small-pox, *preferable* to the variolous, it should be borne in mind, that in many constitutions the security produced even by previous small pox, however severe, is only comparative, and does not prevent the subsequent accession of fever, and the maturation of small-pox pustules after exposure to powerful infection.

The objections of Mr. Goldson, if valid, would go to the entire abolition of vaccine inoculation taken from the human subject; for the inference deduced from his statement would be, that the security given by such inoculation, though at first complete, is every year gradually diminishing, not merely to a certain point of susceptibility to small-pox, but finally to the same degree of insecurity as if no inoculation had ever been performed.

The author, aware of the permanent value of vaccination *immediately from the cow*, makes an exception to this species of cow-pox, and of course attaches the highest importance to the slight, but well defined, difference in colour and appearance which the two species exhibit. He likewise supposes that the usual place of casual vaccination, the hand, is particularly susceptible to irritating causes when the cuticle is abraded, and hence perhaps more efficacious. In this point however, we believe he is mistaken, as, if we recollect right, casual vaccination on the forehead, the shoulder, and other parts, has proved a permanent security for an indefinite number of years.

The author dedicates his treatise to the Vaccine (Vaccine-Pock) Institution, with peculiar propriety, as the original matter was furnished by this society, and as the duration of their practice affords them an opportunity of instituting further experiments on this infinitely important subject.

Dr. Trotter's Essay on Drunkenness.

(Continued from Vol. xi. pp. 568—570.)

After instancing the effects of intoxication in rendering persons unsusceptible of cold, and insensible to pain, Dr. T. in a cursory way, adverts to the very different manner in which different nations are affected by ebriety. The next subject of investigation is the *chemical* effect of alkohol on the fluids and solids of the human body.

“Alkohol, certainly, deoxygenates the blood in some degree; at least, decomposes its floridity. The arterial blood of a professed drunkard approaches to the colour of venous; it is darker than usual. The rosy colour of the eruptions about the nose and cheeks does not disprove this; for it is probable that these spots attract oxygen from the atmosphere through the cuticle that covers them, just as Dr. Priestley observed venous blood, confined in a bladder, to acquire a more florid colour from the exposure to his dephlogisticated air. In the sea scurvy, a disease where, in the advanced stage, the blood is always found of a very dark colour, we know that spirituous liquors, more than any thing else, have a manifest tendency to aggravate every symptom. This fact has often come under my observation; and a very correct statement of the kind is to be found in my first volume on the Diseases of the Fleet, page 410.

“The component parts of alkohol are not sufficiently known; but it has a large proportion of hydrogen, which is proved by its combustion in pure air, when water is produced. Thus fourteen ounces of alkohol burnt in a proper apparatus, with a sufficient quantity of oxygen gas, yield sixteen ounces of pure water; hydrogen and oxygen being the component principles of water, as proved by modern chemistry. Alkohol has a strong attraction for water, and readily mixes with it, and it is the chief vehicle in which it is drank; but in what manner it is separated from the water within the body, would be difficult to find out. The evolution of hydrogenous gas is chiefly learned from the fætor of the breath; it seems to be sent off from the surface of the lungs, in a disengaged state; and is often so pure in its kind from the expiration of a dram-drinker, that it is easily inflamed on the approach of a candle. The process of respiration probably effects this; and I should think at such a time there must be an unusual consumption of vital air. No experiments have been made on the blood of inebriates: and we are not informed, that in the circulating state, it exceeds the common temperature of the human body. But it is said, on the authority of Mr. Spalding, the celebrated diver, that after drinking spirits he always found the air in his bell consumed in a shorter time than when he drank water. This gentleman was lost in Dublin bay in 1783, in attempting to take the treasure out of an imperial Indiamen that sunk there, on her passage from Liverpool, where she was built: the misfortune, it appeared, was owing to the negligence of the attendants in not renewing the air.

“ If

" If the blood of drunkards is strongly charged with hydrogen, must not that very much affect the quality of the biliary secretion, independent of any effect it may have on the liver itself? Might not the resinous matter which bile is found to contain, be greatly increased after spirituous potation? The liver is an organ very liable to be injured by hard drinking; this gives cause for suspicion, that the *chemical* operation of alcohol on the blood and the bile, has also some share in producing hepatic diseases. It may increase the generation of *biliary calculi*, and the disposition to *dyspepsia*, which prevail in the constitution of drunkards.

" Is the perspirable matter of drunkards at all impregnated with hydrogenous gas?

" I am much of opinion that the *chemical* operation of alcohol, has a great influence in retarding the healing of wounds, and in converting them into ulcers. I believe all surgeons agree, that such an effect takes place after hard drinking, though it is generally attributed to the fever and inflammation which it occasions. The common appearance of eruptions on the surface of the body, may in a great measure be referred to the same source. The exhalations of hydrogenous gas, which arise in some places, are very apt to irritate the eyes, and bring on a painful ophthalmia; from which it is fair to infer, that the same effect may take place, from blood loaded with hydrogen, circulating through the minute vessels of the *tunica adnata*, as the disease is a common one with wine-bibbers. The fœtor of ulcers, in all drunken subjects, is unusually great; and I shall speak of this under the diseases.

" But the most interesting part of this doctrine, is the *combustion of the human body*, produced by the long and immoderate use of spirituous liquors. Such cases are on record; and a collection of them, with remarks, is to be found in the *Journal de Physic*, year 8, by Pierre Aime Lair. I subjoin a copy of that memoir, taken from the *Philosophical Magazine*, vol. vi. p. 132, by Mr. Alexander Tilloch."

Then follows a considerable number of instances of persons who had been addicted to the immoderate use of spirits, undergoing such combustion; and Dr. T. concludes that part of his subject with the following reflections.

" I shall not extend further these observations on the combustion of the human body, as I flatter myself that after this examination every person must be struck with the relation which exists between the cause of this phenomenon and the effects that ensue. A system embellished with imaginary charms is often seducing, but it never presents a perfect whole. We have seen facts justify reasoning, and reasoning serve afterwards to explain facts. The combustion of the human body, which, on the first view, appears to have in it something of the marvellous, when explained exhibits nothing but the utmost simplicity: so true it is, that the wonderful is often produced by effects which, as they rarely strike our

eyes, permit our minds so much the less to discover their real cause.

"Some people may, however, ascribe to the wickedness of mankind what we ascribe to accident. It may be said that assassins, after putting to death their unfortunate victims, rubbed over their bodies with combustible substances, by which they were consumed. But even if such an idea should ever be conceived, it would be impossible to carry it into execution. Formerly, when criminals were condemned to the flames, what a quantity of combustible substances was necessary to burn their bodies? A baker's boy, named Renaud, being condemned to be burnt a few years ago at Caen, two large cart-loads of faggots were required to consume the body, and at the end of more than ten hours some remains of the bones were still to be seen. What proves that the combustion in the before-mentioned instances was not artificial is, that people often arrived at the moment when it had taken place, and that the body was found in its natural state. People entered the house of Madame Boiseau at the time when her body was on fire, and all the neighbours saw it. Besides, the people of whom I have spoken were almost all of the lowest class, and not much calculated to give rise to the commission of such a crime. The woman mentioned in the transactions of Copenhagen was of the poorest condition; Grace Pitt was the wife of a fishmonger; Mary Jauffret, that of a shoemaker; and two other women, who resided at Caen, belonged to the lowest order of society. It is incontestible, then, that in the instances I have adduced, the combustion was always accidental, and never intentional.

"It may be seen, that a knowledge of the causes of this phenomenon is no less interesting to criminal justice than to natural history, for unjust suspicions may sometimes fall on an innocent man. Who will not shudder on recollecting the unfortunate inhabitant of Rheims, who after having lost his wife by the effect of combustion, was in danger of perishing himself on the scaffold, condemned unjustly by an ignorant tribunal!

"I shall consider myself happy if this picture of the fatal effects of intoxication makes an impression on those addicted to this vice, and particularly on women, who most frequently become the victims of it. Perhaps the frightful details of so horrid an evil as that of combustion will reclaim drunkards from this horrid practice. Plutarch relates, that at Sparta, children were deterred from drunkenness by exhibiting to them the spectacle of intoxicated slaves, who, by their hideous contortions, filled the minds of these young spectators with so much contempt that they never afterwards got drunk. This state of drunkenness, however, was only transitory. How much more horrid it appears in those unfortunate victims consumed by the flames and reduced to ashes! May men never forget that the vine sometimes produces very bitter fruit,—disease, pain, repentance, and DEATH!

How

How far are the Acts of the Drunkard to be palliated?

" This is a point of great importance in civilized society: but it is not the province of the physician to decide with a legal view. Every human being, who was ever intoxicated, must have found, on reflection, that he had said and done things which he would have neither thought of nor acted in a state of sobriety. The peace of his neighbour has, therefore, required that the drunkard should answer for his conduct. But it may be asked, ought a madman to answer for his deeds? Certainly. The man who becomes mad from immoderate vinous potation must be amenable to law, because that madness was of his own seeking. Again, it may be said, that the drunken man, being as much in a state of delirium as any maniac, ought he to be punished for doing what he is unconscious of? Yes: But punishment might be mitigated here, if it shall appear that no preconceived malice had prompted him. This is, I think, what lawyers call *mal propense*. Were a man, during ebriety, to sign a deed, by which he should dispose of his property in an improper manner, to the injury of his family; quere, would such a deed be legal? It might be deemed legal; but to me it would appear unjust to confirm it; because the man never formed such a resolution when he was in his senses. The acts of the drunkard, in this respect, ought not to be valid: for this plain reason, in the same condition he is not allowed to injure his neighbour, or society at large, with impunity; and therefore he ought not to be permitted to injure either his family or himself. All debts incurred, or money lost at play, in the state of intoxication, ought to be declared *null*, on the loser appealing in a proper manner when sober. This would prevent the gamester and systematic villain from taking advantage of the honest man, and would correct some of the greatest evils in the community.

" When a drunken man is lavish of promises which he never made when sober; be assured his kindness is not worth your thanks.

" When you hear a drunken man boasting of his generosity to his friends; beware, how you receive a favour from that man.

" When you hear a drunken man telling family secrets, whether of his own, or those of other people; put that man down for a fool; and take care what you say in his presence.

" When you hear a drunken man boasting of his favours from the sex; be assured, that man has no honour.

" When you hear a drunken man bragging of his courage; mark that man a coward.

" When you hear a drunken man vaunting of his riches; be assured, he cannot be estimable for his virtues.

" When you hear a drunken man pitying misfortunes which he did not relieve when sober; it is the strongest proof that he possesses no goodness of heart.

" Receive no donations from a drunken man; lest he should ask them again when sober.

" Avoid the company of a drunkard; for if he insults you, and you

you should insist on satisfaction, he will plead want of recollection, as apology.

"Let the sober man beware of the society of drunkards, lest the world should say, that he means to take an advantage of their credulity."

*Account of Diseases in an Eastern District of London,
from May 20 to June 20, 1804.*

ACUTE DISEASES.		Hæmorrhoids - - - -	
Febris Intermittens - -	1	Chlorosis - - - -	6
Pleuritis - - - -	2	Scrophula - - - -	5
Rheumatismus Acutus -	4	Rheumatismus Chronicus	10
CHRONIC DISEASES.		PUERPERAL DISEASES.	
Dyspnœa - - - -	8	Enteritis - - - -	2
Tussis cum Dyspnœa -	14	Menorrhagia Lochialis -	5
Hæmoptysis - - - -	3	Ephamera - - - -	6
Pleurodyne - - - -	2	INFANTILE DISEASES.	
Epilepsia - - - -	1	Pertussis - - - -	6
Cephalalgia - - - -	4	Scrophula - - - -	2
Convulsio - - - -	1	Herpes - - - -	2
Paralysis - - - -	3	Tinea - - - -	1
Syncope - - - -	2	Vermes - - - -	2
Ascites - - - -	4		

MEDICAL AND PHYSICAL I N T E L L I G E N C E.

*Notice from the VACCINE POCK INSTITUTION, No. 44, Broad-
Street, Golden-Square, June 20, 1804.*

THE public mind being of late much disturbed in consequence of successive reports during the whole of the last year, and especially of late, by publications of cases *esteemed* to be instances of the Small Pox two or three years subsequently to the Cow Pock, the Medical Establishment of this Institution have thought it their duty, whatever may be their own opinions, not to be inactive and silent.

Accordingly, I am directed to state, that in the last fortnight a number of subjects, who had undergone vaccination in the year 1800 (*the first year of the new practice at any professed institution,*) have been submitted to the test or counter proof, *variolation*, in
circum-

circumstances the most favourable for exciting the Small Pox.— Besides these trials, additional ones have been instituted in subjects who were vaccinated in Dr. Pearson's early practice in 1799. Further,—Reports have been already received at the Institution from several provincial correspondents, who were witnesses to whole parishes of subjects vaccinated under Dr. Pearson's and Mr. Keate's inspection, or with matter furnished by them early in the year 1799.*

A very brief, but it is presumed, conclusive statement of evidence collected from these sources on the question, with which some persons have agitated the minds of so many families, is intended to be laid before the public in a week or ten days. This statement, it is apprehended, will be the most proper return to the respectable author,† who has lately addressed his pamphlet, "*To the Directors of the Vaccine Institution,*" very justly conceiving that "the point at issue is within the power of this Institution, if they will give directions for a number of persons to be inoculated with Small-pox matter, or exposed strongly to infection, who were vaccinated early in the practice.

As no other professed Vaccine Institution but this has been established long enough to ascertain this demand, it has been determined to comply.

W, SANCHO, Secretary.

True Character of the Plague.

To compensate for all the distresses brought on humanity by the campaigns in Egypt during the late war, it is consoling to reflect upon the discoveries which have been made by English and French physicians and officers, of the TRUE NATURE OF THE PLAGUE. Among all the writers of both nations, Affalini and Sir Robert Wilson deserve most credit. The latter disproves the old superstitious notion, that this disease is imported from Turkey into Egypt. He proves that it is the effect of exhalation from the putrid matters left by the overflowing of the Nile, and from other liquid and putrid matters in other parts of the country. He says it is communicated by the atmosphere, and that persons recover by being removed from the places where they are affected by it, to an air beyond

* It may be very important information to affirm, that the matter now used at this Institution was THAT originally taken in January and February, 1799, by one of the Physicians, from cows in Mary-le-Bone Fields and Gray's Inn Lane, with the addition, about three years ago, of matter from the Milaneic, by Dr. Sacco. But it does not appear that this extensive succession has at all altered the properties, nor that there is any difference of properties among these different sources of matter. The experience of this Institution does not justify the conclusions that the failure of Cow-pock in preventing the Small-pox depends in general upon the selection of matter on a particular day.

† See Mr. Goldson's Cases of Small-Pox subsequent to Vaccination, lately published.

beyond the reach of putrid exhalation. He denies its ever being contagious, except under those circumstances of filth and close confinement which now and then render all other fevers liable to become sources of infection. The general belief in these facts is calculated to do away the accumulated evils of ages, which have arisen from a belief of the plague being a specific disease, and kept alive like small-pox, only by being propagated from one person, or one country, to others. Millions of lives have been lost by this error. Sir Robert Wilson does not hesitate to declare, that the plague might be annihilated in Egypt, or made a mild disease; and mentions, as the means for that purpose, the use of lime, coals, paving the streets of their cities, the formation of roads, the white washing of the apartments in every house, the use of well-burnt brick instead of wood in their buildings, and the draining off all stagnant waters. He says, the most effectual remedies now employed for its cure are embrocation of the body with sweet oil, and the use of mercury.

Discovery of a new Vegetable Acid.

MR. KLAPROTH, on examining a saline substance, found on the bark of the white mulberry tree, (*Morus alba* L.) in the botanic garden of Palermo, by Mr. Thomson, discovered that it contained a new acid. The substance itself is of a brownish colour, covers and penetrates the bark of the tree. Its taste resembles that of succinic acid. Thrown on burning coals, it puffs up and burns, leaving a terreous residuum; 100 parts of water dissolve 35 parts of it in the heat, and 15 parts in the cold. By evaporation, needle like radiant crystals are obtained. Barytes makes no precipitate in the solution of this salt. Alkaline carbonates however occasion a brown precipitate, the colour of which, by calcination, is changed into white. It is dissolved with effervescency in nitric acid. Sulphuric and oxalic acid occasion, in its solution in nitric acid, precipitates, which indicate the presence of lime. Acetate of lead forms in it an insoluble precipitate which was easily reducible on burning coals; nitrate of mercury formed white flakes, and nitrate of silver brown streaks. These experiments induced Mr. Klaproth to conclude that this salt, collected on the bark of the mulberry tree, is composed of lime and a particular vegetable acid. On decomposing this salt by the carbonate of ammonia, Mr. Klaproth obtained a precipitate of carbonate of lime. The liquor yielded by a proper evaporation, long straight prisms; and even the water of these crystals precipitated the nitric solutions of copper with a green colour of cobalt, pale red; of iron, brown; and of mercury, silver and lead, brown. The same liquor made water and acetate of lead slightly turbid, and likewise the muriates of tin and of gold, and the nitrate of nickel. In order to obtain this acid pure, Mr. Klaproth employed the precipitate, obtained from a mixture of a solution of the calcareous salt and acetate of lead. This precipitate

precipitate was afterwards decomposed by diluted sulphuric acid. The proportions employed were forty-five grains of the precipitate and twenty-four grains of acid, diluted with one drachm of water. The sulphate of lead was separated by the filtrum. The liquor being evaporated, yielded by crystallization, thirty-four grains of acid in fine needles of a pale wood colour. The natural calcareous salt was also directly decomposed by sulphuric acid, and the result of which was the same. He employed thirty grains of the salt, and twelve of sulphuric acid. The properties of this new acid consist in its having a similar taste to succinic acid; in being exposed to the contact of air, without experiencing any change; in dissolving with ease in water and alcohol; in not precipitating metallic solutions. When distilled, part of it is destroyed, but the rest sublimed, which proceeding may be employed to separate it from the adhering extractive matter. Mr. Klaproth proposes to call it *moronitic acid*, and its saline combinations, *moronitates*.

M. DEMMENIE has noticed that the solution of copal may easily be effected by exposing it to the vapours of alcohol, or oil of turpentine. For that purpose an alembic may be filled one-fourth with either of these fluids, and some pieces of copal suffered to be suspended by threads in it, over the surface of the fluid. After having made the alcohol, or oil of turpentine, boil, the copal becomes liquified, and is dissolved.

The oiliferous Chinese radish, the *raphanus Chinensis annuus oiliferus*, is much cultivated in Piedmont and the Milanese. From $3\frac{1}{2}$ ounces of seed, a farmer, named Grandi, obtained a produce of 583 pounds, which yielded 200 pounds weight of oil. The Chinese extract from the seed half its weight in oil. It is employed by the Italians for culinary purposes, burns without emitting any smoke, and gives light as clear as common oil. In the Milanese, the seed is sown in March, the land having been ploughed in autumn, and again before the seed is sown, but not manured. The plants are to be thinned to the distance of three or four inches from each other.

An experiment has lately been made at Lyons to try the effects of vaccination in preserving fine-woolled sheep from the ravages of the scab, which prevailed in the neighbourhood, and had already extended its pernicious influence to a flock of common sheep, belonging to M. Flanders, of Espina. Another flock of the Merino's breed, belonging to the same gentleman, was submitted to vaccination, which produced its usual effect, and preserved the flock in the midst of the contagion. Forty of the sheep which had undergone the operation were placed among the infected flock, but they withstood the attacks of the disease, while not one of those which had not been vaccinated escaped.

BILL OF MORTALITY,

For PORTSMOUTH, NEW HAMPSHIRE, for A. D. 1801.

By LYMAN SPALDING, M. B. &c.

COMPLAINT.	AGE.	Jan.	Feb.	Mar.	Apr.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Total.
Aphtha	- - - - - 3 weeks								1				1	1
Apoplexy	- - - - - 39 years						2			1			1	5
Atrophy	- - - 3 weeks, 50, 3 years, 4 months, 55 years								1		1			2
Cancer	- - - - - 65, 76 years								1		3			7
Cholera Infantum	- - - - - 6 to 18 months							1	1	2				20
Consumption	54, 50, 56, 75, 44, 35, 27, 83, 65, 69 56, 50, 60, 44, 32, 55, 26, 40, 48, 32	4	1		1	3		1	3	1	2	2	2	2
Debauchery	- - - - - 25, 29 years				1			1						2
Dropsy	- - - - - 28, 41 years						1							2
Dropsy in the Brain	- - - - - 12 months			1										1
Epilepsy	- - - - 4 weeks, 10 years, 8 weeks			1					1					3
Fever, Bilious	- - 26, 30, 45, 18, 28, 18, 14, 64, 8, 33	1				1	2			2	1		2	10
Fever, Pulmonic	- - - 12 days, 15, 21, 84 years			2	1					1	1		1	4
Hooping Cough	- - - 3 months to 4 years		1								4	7	1	11
Illiatic Passion	- - - - - 95 years													1
Mortification	- - - - - 60 years													1
Nephritis	- - - - - 74, 66 years	1					1							2
Old Age	- - - - - 82, 99, 75, 76, 80	2						1		1		1		5

Palsy - - - 54, 42, 68, 64, 77, 46, 64, 64, 43, 60, 19, 80	1	2	2	3		2				3	12
Phrenitis - - - - - 31 years			1								1
Scrophula - - - - - 8 years											1
Still-born	1										1
Burnt - - - - - 71 years											1
Drowned - - - - - 60, 18, 45 years				1						1	3
Fall - - - - - 17 years									1		1
Frozen - - - - - 38 years	1										1
Paregoric - - - - - 6 months									1		1
Casualties.	11	3	6	4	10	4	8	9	15	12	100
Total	11	3	6	4	10	4	8	9	15	12	100

Portsmouth, situated 43 d. 5 m. north, 70 d. 41 m. west from London, contains about 5600 inhabitants. The town has been very healthful, not one in fifty-five having died. A bilious remitting fever prevailed the whole year, which in several instances, in September and October, manifested the malignant type. From June to October, the cholera infantum was prevalent. From September to the end of the year, the whooping cough was endemic, very few children escaped it. A fifth part have died of phthisis pulmonalis! "*Is there no balm in Gilead? Is there no physician there?*"

M. DEYEUX

M. DEYEUX has invented a new filter for purifying water. The substance through which the water passes is charcoal, in small pieces, but not reduced to powder. At the School of Medicine in Paris, he poured water taken from the kennel, and some in which putrid carcasses had been immersed three weeks, upon his filter, and in a few minutes it ran off in both cases perfectly clear, limpid, and without taste or smell.

Messrs. HARMAN and DEARN, of Rotherhithe, have invented an apparatus for filtering water, which will obviate the inconveniences of the filtering stone. The new apparatus consists of a stone ware vessel, perforated with holes upon which coarse gravel is laid, upon that a stratum of fine gravel, and lastly fine sand. Upon the top of the sand is laid a perforated and loaded board or plate of earthen ware, to prevent the sand from being disturbed when the water is poured in. The fineness and depth of the siliceous sand will regulate the perfection and expedition of the process, and the delicacy of the vessels and sand may be insured by changing the latter from time to time; for example, once in a fortnight or three weeks.

The following is a prize-question proposed at Paris:—"What are the characters that, in animal and vegetable matter, distinguish the active and passive substances in the operation of fermentations?"

Mr. DONOVAN, author of the Natural Histories of British Birds, Insects, &c. will shortly lay before the public the Natural History of British Shells, including coloured figures, arranged after the Linnean manner, with scientific and general Observations on each.

TO CORRESPONDENTS.

Mr. CHEVALIER's Treatise on Gun-Shot Wounds will be noticed in our next Number.

A Communication, with a Drawing, has been received from Mr. EDGAR.

ERRATA.

Page 540, line 13, for *nor never will*, read *nor ever will*.

543, 3, from the bottom, for *sensation*, read *cessation*.

538 to 546, inclusive, (running title) for *on opium*, read *on hydrophobia and tetanus*.

547 and 548, for *on opium*, read *on diabetes*.

THE
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*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

THOSE herpetic affections which so frequently appear among the children of the poor, and which are evidently contagious, often prevent the vaccine virus from producing its correct action. The skin, although it be apparently sound at the point of insertion, is nevertheless so influenced by the disease, as frequently to baffle all our efforts to produce a correct pustule, and consequently to secure the constitution from the contagion of the small-pox. The eruptions I allude to, for the most part, correspond with those of the Second Order of Cutaneous Diseases described by the ingenious Dr. WILLAN, under the term *Psoriasis Diffusa*.\* The face, the eye-lids, the tender skin behind the ears, and particularly the scalp, are the parts most commonly affected; but the limbs and body not unfrequently exhibit the same appearances. As far as I have been able to observe, it is more common among the lower classes of society in the country than in London. It is not uncommon to see it pass through a village school, assuming a variety of characters, according to the state of the constitution of the child affected with it. I do not mean to say, that the pustule† is always imperfect, and not effective, when the inoculated patient has this malady; on the contrary, it is sometimes perfectly correct, and much more frequently so when it has been of

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\* The labors of Dr. Willan in this rugged field of science, all should acknowledge with thankfulness and gratitude.

† Having in my former Treatises used the term *pustule*, I make choice of it now, lest it should create confusion; though, perhaps, not so appropriate as *pock* or *vesicle*.

long standing, than when in its recent state; and what is remarkable, the disease is then (when of long duration) sometimes swept entirely away. I have noticed this impediment to the perfect formation and progress of the vaccine pustule in my general correspondence for more than two years past, and conceive it to be a more frequent source of the spurious pustule than any other, or indeed than all the rest united. Dr. Marcet inserted some hints I communicated to him on this head, in your Journal, for May, 1803, but I believe they have not been much attended to.

In my Paper of Instructions for Vaccine Inoculation, published some years back, I have endeavoured to guard the inoculator from being deceived by false appearances, by the following observations.

“The vaccine fluid is liable, from causes apparently trifling, to undergo a decomposition. In this state it sometimes produces what has been denominated the spurious pustule; that is, a pustule, or an appearance on the arm not possessing the characteristic marks of the genuine pustule. Anomalies assuming different forms may be excited, according to the qualities of the virus applied, or the state of the person inoculated; but by far the most frequent variety or deviation from the perfect pustule, is that which arrives at maturity, and finishes its progress much within the time limited by the true. Its commencement is marked by a troublesome itching; and it throws out a premature efflorescence, sometimes extensive but seldom circumscribed, or of so vivid a tint as that which surrounds the pustule completely organized; and (which is more characteristic of its degeneracy than the other symptoms) it appears more like a common festering produced by a thorn or any other small extraneous body sticking in the skin, than a pustule excited by the vaccine virus. It is generally of a straw colour, and when punctured, instead of the colourless, transparent fluid of the perfect pustule, its contents are found to be opaque. A little practice in vaccine inoculation attentively conducted, impresses on the mind the perfect character of the vaccine pustule; therefore, when a deviation arises, of whatever kind it may be, common prudence points out the necessity of re-inoculation.” The deviation, when it arises from the cuticular disease I am speaking of, generally corresponds with that above recited. I might have added, that if the pustule is not much disturbed in its course by scratching, it commonly terminates in a scab of a pale brown or amber

ber colour, and soft in its texture compared with that produced by the true vaccine pustule. I have abundant testimony to prove, that the fluid taken from a spurious vaccine pustule thus excited, is capable of propagating and perpetuating its like. Indeed, the vaccine fluid, even in a pustule going through its course perfectly, if taken in its far advanced stages, is capable of producing varieties, which will be permanent if we continue to vaccinate from it. I mention the subject briefly now; but it is my intention (as it embraces a wide field) to enlarge upon it, and some others connected with vaccination, when circumstances will permit me. Medical practitioners should be particularly circumspect when they inoculate those who have cuticular diseases. The danger of insecurity would be at once obviated, if on the appearance of an irregular pustule, the disease were to be subdued by proper applications, and the patient then reinoculated. I shall select a case, to show the efficacy of this mode of proceeding.

A family, consisting of five fine healthy-looking children, were inoculated by me at Cheltenham in the autumn of 1803 with fluid virus taken immediately from a proper vaccine pustule. On examining the punctures on the fifth day, I found, that on the left arm of one of the children, the pustule was advancing too rapidly. It was of an irregular form, contained already an opaque fluid, and was surrounded by an efflorescence of a dusky red colour to the extent of one-third part of an inch. Such an intolerable itching was excited, that the boy (who was only three years old) could not be prevented from rubbing it. This appearance led me to an examination, and on the child's head I observed an herpetic blotch not much larger in circumference than a shilling. The hair around the part was stiffened by the concreted ichor oozing from the sore, which had made its appearance about ten days. No eruption shewed itself in any other part of the body. The pustule was repeatedly broken by the child's scratching and rubbing it; and the inflammation on the arm, which began to spread so early, on the eighth and ninth day became very extensive. The child, at the same time, was hot and restless. A soft, amber-coloured scab\* now be-

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\* It may be remarked, that purulent matter cannot form a scab so hard and compact as limpid matter. Hence arises the difference between the variolous and the vaccine scab. It accounts too for the varicellous scab being commonly harder than the variolous.

gan to form; but this being rubbed off, the part ulcerated and healed slowly, leaving a cicatrix deeper and larger than in ordinary cases. The disease on the scalp was now quickly subdued by the use of tar ointment; and at the expiration of six weeks from its commencement, the inoculation was repeated, when the pustule went through all its proper stages with perfect regularity. The rest of the children inoculated at the same time, went through the cow-pox in the ordinary way, without any irregular appearance.

I have selected this case, to shew how slight a local appearance may produce a change in the state of the skin, at a distance from it. I cannot call it a general change in every case, as I have sometimes found a correct pustule on one arm, and a spurious pustule on the other; indeed, I have sometimes found the perfect and imperfect pustule on the same arm, within two inches of each other, when the virus inserted was taken the same instant from the same perfect pustule. It happens that I more frequently detect the disease by the appearance of the arm, than previously to inoculation. Parental fondness is often mismanaged, and induces mothers to conceal eruptive complaints on their children.

These are the constitutions which sometimes shew a few wandering pustulous eruptions after Vaccine Inoculation; and so peculiarly irritable is the skin when influenced by herpes, that the smallest wound, a slight scratch, or the pricking of a pin, for example, commonly produces inflammation, and slight, superficial suppuration.

The preceding year I inoculated another child at Cheltenham, whose face was involved in one general thick incrustation. She had been in this state, without any material variation, upwards of two years, during which time many applications had been used to no purpose. The scalp partook, in some degree, of the same kind of disease; but the body and limbs were free from it, except when any of the acrid fluid, oozing from fissures in the crust, chanced to fall upon the neck or breast; it then invariably produced, for a time, a similar appearance. On vaccinating this child by a single puncture in each arm, the pustules went through their course correctly. On their decline, the incrustation began to be less coherent, and to drop off; and at the expiration of a fortnight, the face was smooth, no vestige of the disease remaining, except a slight inflammation of the eye-lids.

Cases



Cases of this sort have become familiar; Mr. Ring has given several in his very copious Treatise on the Cow-pox; and they have been mentioned by other authors, both here and on the Continent.

I have in like manner sometimes seen papulous eruptions, which have long proved troublesome, speedily swept away.

This I think may be accounted for. The vaccine virus, a few days after its insertion, begins to act upon the constitution. It is then manifest, from a new appearance which these eruptions put on, commonly that of increased inflammation, that a new action has been excited in them. The original morbid action therefore becomes deranged and is destroyed, and consequently the disease is conquered. I have seen many instances where pre-existing pimples have been converted into vaccine pocks, which have kept pace with those on the arms in their progressive changes.

Seeing that the skin, when disposed to reject the ordinary action of the variolous virus, rejects the vaccine also, I shall just observe, it occurs to me as probable, that its herpetic state, at the time of inoculation, has been the chief source of those failures, which many practitioners have witnessed in inoculating for the small-pox: for in many instances where, on subsequent exposure to infection, the disease has been taken, it has been found that the process of inflammation and suppuration on the arms had gone to a greater extent than in ordinary cases, that the symptomatic affections were clearly marked, and that even eruptions, though small and seldom maturing, have appeared. But as the state of the arm became a secondary object in inoculating for the small-pox, our solicitude being directed to what appeared of far more consequence, the number of pustules, I almost despair of obtaining much information on this point.

I shall conclude this paper by observing, that although the Vaccine Inoculator does not inflict a severe disease, but, on the contrary, produces a mild affection scarcely meriting that term, yet, nevertheless, he should be extremely careful to obtain a just and clear conception of this important branch of medical science. He should not only be acquainted with the laws and agencies of the vaccine virus on the constitution, but with those of the variolous also, as they often interfere with each other.

A general knowledge of the subject is not sufficient to enable or to warrant a person to practice Vaccine Inoculation;

tion; he should possess a particular knowledge; and that which I would wish strongly to inculcate, as the great foundation of the whole, is an intimate acquaintance with the character of the true and genuine vaccine pustule. The spurious pustule would then be readily detected, whatever form it might assume; and errors known no more.

I am, &c.

Berkeley, July 15, 1804.

EDWARD JENNER.

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

**I**N pursuance of a plan I long ago commenced, I now transmit some miscellaneous remarks, which I beg the favour of you to insert. The first is relative to Diarrhœa and Cholera Morbus; diseases which, as Sydenham observes, are as sure to return at this season as swallows in the summer.

I have long been of opinion, that an erroneous theory, with regard to these complaints, has given rise to an erroneous practice. The bile is commonly supposed to be the principal cause of them; but different persons entertain different sentiments, respecting the particular manner in which the bile produces these disorders. Some ascribe it to a redundancy, others to a putridity, and others to an acescency of that fluid.

The last I believe to be only an imaginary alteration of bile, and that it never becomes acid. It frequently meets with more acid in the primæ viæ than it is capable of neutralising; and being evacuated with the other contents of the stomach or bowels in that state, it has given rise to this opinion.

Such an error would be of little consequence, did it not lead to a wrong practice. I have frequently known aperients continued in such cases long after the strength of the patient could bear them; and am perfectly convinced, by much experience, that in general they are not only unnecessary, but prejudicial in these complaints.

At the same time, it must be obvious to every one, that astringents should be proportioned to the disorder; and that whether they are exhibited before aperients, or after them in the usual manner, there is always a possibility of exceeding the bounds of moderation. But any practitioner who

who is conversant in the treatment of such complaints must know, that when constipation follows a diarrhœa, it is easily removed, either by the oleum Ricini, magaesia vitriolata, or a clyster.

The following is a formula, which I have found equally pleasant and efficacious. R. Cretæ præp. ℥iv. Pulv. gum Arab. ℥ij. Aq. distill. ℥iv. Aq. cinnam. ℥i℥. Sp. cinn. Syr. simpl. a. ℥ij. M. To this I commonly add 30 drops of tinct. opii, and direct two large spoons full to be taken post s. l. s.

The following is a convenient form for a draught.

R. Cretæ præp. ℥j. Pulv. gum Arab. gr. x. Aq. distill. ℥j. Aq. cinnam. ℥ij. Sp. cinnam. Syr. simpl. a. ℥℥. M. This is also a proper quantity to serve as a mixture for a child. The quantity of tincture for each purpose it is unnecessary to specify, since it must depend on the case.

I embrace this opportunity of pointing out an error in the London Pharmacopœia; or, at least, an alteration, which, I have been informed by an eminent physician, is an error.

When the Dispensatory was last revised, the gum Arabic, in the *Mistura à Cretâ*, was increased to eight times its former proportion. This, I am told, was a mistake; two ounces being directed, instead of two drachms. It was common, previous to this edition of the Dispensatory, to direct the composition to be made with double the former quantity of gum Arabic; but so remarkable a deviation as that alluded to, could not have arisen from design. It is fortunate the ingredient was a mild one; had it been otherwise, I should long ago have pointed out the supposed error.

I shall take the liberty of mentioning a method, by which the preparation of the Chalk Mixture is facilitated; a circumstance of no small moment, in some places, and at certain seasons, when autumnal complaints are prevalent. The method I follow is, to keep the prepared chalk and the gum Arabic in powder, mixed together in the proportion of two parts of the former with one of the latter, under the title of *Pulvis Albus*. Two drachms of this powder are sufficient for a six ounce mixture; and half a drachm for a draught, or for an ounce and half mixture for a child.

It must be obvious to every one conversant in practice, that a powder is a more convenient form of medicine for the poor, as well as for those who live at a distance, and cannot have a frequent supply; I shall therefore insert a

composition, which I have found extremely useful, and particularly during the late scarcity of provisions, when, owing to debility and improper foods, a diarrhœa was common, especially among the children of the poor.

R. Cretæ præp. ʒxviij. Pulv. gum Arab. ʒix. Sacchari ʒij. Pulv. cort. cinnam. ʒij. Opii purif. ʒj. M.

I have sometimes substituted ginger for cinnamon, without any apparent disadvantage. This experiment was made for the sake of ascertaining, whether it might not be prepared in this manner, in any place where the expence of cinnamon, or of cassia, might be an object.

Those who have much practice among the poor must know, that a cheap medicine, which can be kept ready prepared, is an object of no small importance. The pulvis è cretæ comp. c. opio is of this kind; but it is not well adapted for children, on account of the bitterness of the tormentil.

Two drachms of this powder is a valuable present to a poor person, whose child labours under a diarrhœa. As much as will lie on a silver penny, or a seven shilling piece, may be given to an infant, in a little water; and repeated after every loose stool. A caution should be given not to add sugar.

This composition may be called Pulvis Astringens. I have known many hundred children apparently rescued from the grave by its salutary effect; and been amply repaid for the trifling expence of the composition by the gratitude of their parents. I therefore conceive it an indispensable duty to recommend the formula to others.

Were it generally adopted, or any better composition substituted, children would not so often be purged to death with rhubarb or magnesia; which, from the manner in which they are now used, or rather abused, may be considered as their bane.

To correct this very prevalent error, in some degree, I have recommended to many paupers, whose children laboured under slight diarrhœa, chalk instead of magnesia. This has been attended, in most instances, with a good effect; but it is sometimes insufficient, and the astringent powder is preferable.

I am far from being convinced, that rhubarb possesses the degree of astringency commonly ascribed to it. But if it be toasted, with an equal quantity of nutmeg, it becomes an excellent medicine as an astringent, and will sometimes succeed when all other astringents fail. The efficacy

efficacy of this composition is increased by the addition of an opiate, or of any kind of spirit.

A person who had laboured under a diarrhœa for a long time, and been under the care of some of the most experienced medical practitioners, but in vain, was cured in a few days by a drachm of rhubarb and a drachm of nutmeg, toasted, and divided into three parts. Of these, one was taken every other morning, in brandy and water.

The most useful articles of food and drink that I have known in these complaints, when they occur in adults, are beef tea and cold brandy and water. Port wine is a popular, but a fallacious remedy; and in all probability, oftener does harm than good.

It is scarcely necessary to inform any medical man, that such persons as are troubled with this complaint, ought to abstain from vegetables, white meats, and malt liquor. But it is not unnecessary to inform the inexperienced practitioner, that unless he is very strict in his injunction, he will often be deceived in this respect, and be baffled in his attempt to cure his patient.

It must appear evident, from the manner in which I enlarge on this subject, that I think it of the greatest importance. A diarrhœa is one of the most frequent complaints, and attended with danger when it occurs in children, or in others of a weak constitution; and it is well known, that such are most liable to the disorder.

Various reasons are sometimes assigned for exhibiting aperients in this complaint, and even for repeating them, when there is no just reason for the practice; and the remedy is frequently worse than the disease. Among other reasons assigned, are those respecting the colour or the fœtor of evacuations. These, however, in a real diarrhœa, are only imaginary reasons for administering a cathartic.

A fœtor of the stools is frequently ascribed to a redundancy of bile; but surely this is an error, since it is acknowledged by the best judges, that the bile is of an antiputrescent nature; and every practitioner must know, that when there is an obstruction of the biliary ducts, the stools are often remarkably fetid.

If, in a common diarrhœa, cathartics are not in general necessary, but rather hurtful, they are less necessary, and more hurtful, in a cholera morbus. It is a popular opinion, that such a complaint must not be suddenly stopped. It is not, in general, easy to stop it suddenly; I have, however, sometimes known it yield to a single dose of the astringent; and have observed, that the cure is full as permanent in such instances, as in those where the evacuation

tion gradually ceases. This would not be the case, were the evacuation critical.

It must also be considered, that such disorders are most frequent when the habit is relaxed by a sudden accession of hot weather. Hence a fermentation takes place in the stomach; in consequence of which, and an increased irritability of the whole primæ viæ, the complaints in question are excited. This opinion is strengthened by the common observation, that fruit is the general cause of the disorder. Fruit, particularly that which abounds with an acid, is indeed a very common cause, but far from being the only one of this disease; hard and indigestible substances of any sort, produce a similar effect. But debility, induced by sudden or long prevailing heat, appears to be the principal predisposing cause.

One very common proximate cause of a diarrhœa is stale malt liquor, which has in some measure undergone the acetous fermentation. In this case, as well as in those occasioned by sour fruits, or by an acid generated in the primæ viæ, it is surely more rational to correct the acid, to check fermentation, and to warm and invigorate the system, than to exhaust the little remaining strength by a debilitating plan.

I have sometimes known emetics given in the cholera morbus, but with very ill success. Happily, they are too soon rejected to do much mischief; but they occasion delay. The more violent the vomiting or purging is, the more powerful means are necessary for subduing them; and the more necessary it is to employ such means without delay. In cases of extremity, many a patient would be lost, were not the remedy frequently repeated; but the necessity of such repetition depends on a variety of circumstances, particularly on the quantity retained by the stomach.

The most distressing symptom in a cholera morbus, both to the practitioner and the patient, is the vomiting. To remove this, the medicines before mentioned are not ill adapted; but there is nothing which I have known so readily succeed, in some cases, as a small quantity of brandy, given alone, or with a dose of tinct. opii, adapted to the nature of the case.

Large quantities of chicken-broth were formerly given to persons labouring under this complaint. Such a practice was probably the result of the humoural pathology; and founded on error. As far as I am able to judge, it is pernicious; and only protracts the disease. The patient should

should rather abstain from drinking; to which he is in many cases prompted by violent thirst: but what he drinks, unless the quantity be very small, only aggravates the disorder.

This complaint is not so fatal as might be expected; but the sufferings of the patient are so great, as to demand every assistance that art can give. I many years ago communicated my sentiments on this subject to a physician, who has long superintended the publication of this work, with honour to himself, and advantage to the public. His ideas were different from mine; and similar to those commonly entertained by medical practitioners. It was, however, no small gratification to me, and no small confirmation of the propriety of the practice I had long pursued, that this gentleman, some time afterwards, acknowledged he had also tried it with advantage.

A remark made in the Medical Journal, on a practice somewhat analogous to this, in one part of America, proves that the learned Editor has had no reason to alter the favourable opinion he entertained of this mode of treating diarrhœa and cholera morbus. He has had the candour to acknowledge, in a very respectable society, that he first adopted the practice at my suggestion; and that he still found it prove successful. This I mention, because I am sensible what weight his opinion will have with the members of the medical profession.

It is not without great concern, I am compelled to be a daily witness of the injury resulting from a contrary practice; which I am confident, sends a multitude of victims to an untimely grave, particularly of infants. What adds to the mischief is, a very prevalent opinion that a diarrhœa is salutary; and particularly during the period of dentition. This is often carried so far, that children are supposed to be in no danger who cut their teeth with a purging. How absurd this opinion is, it is unnecessary to inform any one of experience and discernment. It is a vulgar error, of a most fatal kind. I have particularly remarked, that no children suffer more from dentition than those who labour under this complaint. It particularly attacks those who are already weak; rendering them still weaker; and it must be apparent to every person, that debility at the same time retards the growth of the tooth, and occasions irritability of the gums, as well as of the whole system. Hence the sufferings of an infant are augmented, and prolonged; and a fatal catastrophe is a frequent result.

A diarrhœa

A diarrhœa is often occasioned by given children cathartics after eruptive diseases; a practice which medical men in general acknowledge to be totally unnecessary; and I hope, in time they will discontinue what, they must perceive, is hurtful. It is also a common custom with the lower classes of the community, to give children aperients for heat of every species; whether it proceeds from teething, from a cold, from the season of the year, from close and crowded apartments, or from a feather-bed. This custom, indeed, is not confined to the poor: and it may be doubted whether, in modern times, magnesia has not killed more than the sword.

Purging medicines are also considered by the ignorant, (a numerous tribe) as indispensably necessary in every kind of cutaneous disorder; and nothing is more common in this metropolis, than to give a child magnesia, or a course of alteratives, for a bug-bite.

This is a species of eruption that deceives parents and practitioners more frequently than any other. It is, indeed, by far the most common eruption of any in great towns; and affords the ignorant and the malicious an excellent opportunity of abusing the cow-pox. They call it a humour; and pretend it is owing to vaccination. It assumes various forms: at first it is like the sting of a nettle, or a nettle rash; afterwards it resembles a miliary eruption; then, as it gradually declines, it resembles a common rash. It has, however, often been dignified with pompous names; and been the subject of many a grave consultation. It sometimes is pustulous, and mistaken for the small-pox; and on this, as well as many other accounts, is not to be considered as unworthy of notice in a Medical Publication. It principally affects those parts which are uncovered, as the face, neck, and the fore arm. The upper part of the arm is generally free from this eruption; which affords an easy method of detecting the nature of the complaint.

It is often mistaken for the itch; and sulphur is applied in vain, till winter comes and removes the cause of the distemper.

I am, &c.

JOHN RING.

*New Street, Hanover Square, July 17, 1804.*



CASE OF BRAINULAR AFFECTION FROM AN INTERNAL CAUSE; *communicated by W. PATTERSON, M.D. of Londonderry.*

THE 14th of December, 1803, a gentleman, aged above sixty years, was suddenly attacked with a severe pain in his forehead, accompanied with so much megrim and stomach sickness, as would have caused him to fall, had he not received support. To these symptoms were added a coldness; but from the reporter I could not learn that the coldness arose to a visible shudder. He was put to bed, and recourse was had to medical advice; according to which, blood-letting pretty largely in the arm, purging, and blistering the back, legs and head, in succession, were the measures pursued.

Four days subsequent to the seizure, I was called to visit him, and found him in bed, complaining grievously of a violent pain in the forehead, together with an irksome stricture in the eye-balls and in the surrounding teguments. The functions of the brain were impaired by a degree of stupor; but when spoken to in a round tone of voice, he could give tolerably correct answers to the questions that were put to him; yet very speedily would he relapse into the same state of stupor, attended frequently with incoherent mutterings. His pulse at the wrist was unequal, labouring, and accelerated, with a tenseness in the coat of the vessel; at the same time, the temporal arteries throbbed considerably, but were uniform in their action.

The countenance was sometimes pale, sometimes reddish, and at other times suffused with a bluish tinge; the eyes were languid, and the sense of vision seemed so much diminished, that at certain periods one would suspect that it were totally lost, had it not been found that the pupils were influenced by the light of a candle directed on them at various distances. The temperature of the skin was sometimes pretty high, more frequently below the medium warmth, and generally felt languid and flaccid.

For fluids, there was sometimes an urgent thirst; but for solids, little or no appetite remained. His stomach, indeed, continued to have a loathing, and so retrograde a disposition as to approach towards vomiting, which he himself considered to proceed from vitiated bile. His bowels were sluggish, and had not emptied themselves since the operation

operation of the laxative medicine, which was a space of thirty-six hours before I saw him. He was restless, tossed much in the bed; and when he did appear to get sleep, it resembled a morbid comatose state more than a salutary repose. The organs of respiration did not appear to be particularly engaged, nor were their functions so much impaired as might be expected from the acuteness of the case. The urinary organs were equally unaffected.

From the preceding phenomena, I concluded, that there existed a determination of blood to the head, with increased tension in the arteries of the part. Under this impression, I ordered local evacuations, by means of numerous leeches to the temples, and a brisk cathartic to excite and empty the bowels, as well as to promote an equilibrium in the general circulation. The first application of the leeches procured a sensible relief; and therefore it was repeated. The cathartic was not active enough in its operation, and accordingly a stronger one, composed of calomel and aloes, was soon given, and with manifest advantage. The stupor in a short time decreased, and was succeeded by a loud talkative raving, accompanied with an unconsciousness of persons and things around him; of which inattentive state a remnant continued during several days, as particularly indicated by an illusion respecting the place where he lay. The delirious condition lasted some hours, and was followed by a profound sleep, attended with a stertor resembling that of apoplexy, but distinguishable from it by several circumstances, in particular by a softness and equable movement in the pulse.

This change, which occurred within eight days, was the harbinger of convalescence, which gradually, but slowly, took place. The principal impediments in the progress were a tardy return of appetite, and an indisposition to sleep at night, both which remained nearly a month. At present he enjoys as good a share of health as his age and constitution will admit; but his eye-sight remains impaired, and he sometimes feels a degree of pain in the region of the forehead.

Considering the symptoms and phenomena of this case, I am led to conceive, that we would be justifiable in setting it down as a decided instance of apoplexy, some leading marks of which it manifestly wanted. No doubt it might, like other diseases of the brain, have terminated in a manner resembling an apoplectic catastrophe; but, if it had any shade of the apoplectic character, it certainly was  
rather

rather of an anomalous description. It assumed so many of the features of a species of erysipelas, which takes place in the membranes and vessels of the brain, in the evening of life, that I cannot forbear classing it as a variety of that affection. I never have seen legitimate apoplexy take into its train so many symptoms of pyrexia, and terminate by so marked a crisis. Add to this, that, in the preceding spring, he had a similar attack, attended with a more tedious head-ach, which was succeeded by a salutary inflamed eruption on the face; and that, in this country, not long before the second seizure, he had a fit of the ague, to which he was subject abroad. As to the non-appearance of cutaneous inflammation, on the latter occasion, the repeated blistering might be vicarious of that phenomenon; of which the only external spontaneous token was a glutinous discharge from the conjunctivæ and edges of the eye-lids, especially those of the left side.

July 7, 1804.

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#### NEW METHOD OF OBTAINING CONCENTRATED VINEGAR.

By Mr. KRUEGER.

Take red sulphat of iron, 3 ounces; acetit of lead, half an ounce. Mix them, and put them into a retort with a long neck; and having given a strong fire, two drachms of a very concentrated vinegar will pass over into the receiver. This acetic acid is quite pure, and has neither a sulphurous smell, nor does it contain sulphuric acid or lead. It is perfectly similar to that prepared after Westendorf's and Louitz's method.

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#### NEW MODE OF MAKING LAC SULPHURIS.

Eight parts of sulphat of potash are ignited in a crucible with one part of charcoal powder; and after the mass becomes liquid, it is dissolved in four times its weight of water, and boiled; during which time sulphur is added till it can be no more dissolved. The mixture is afterwards diluted with twenty parts of water, and suffered to stand. Then it is decanted, and precipitated by diluted sulphuric acid. The quantity of this production amounts to one-half of the sulphat of pot-ash which has been employed. The sulphur may be also precipitated by concentrated vinegar, in order to obtain, at the same time, acetite of pot ash.

Account

*Account of Diseases in an Eastern District of London,  
from June 20 to July 20, 1804.*

| ACUTE DISEASES.       |    | Convulsio - - - - -     |    | 1 |
|-----------------------|----|-------------------------|----|---|
| Peripneumonia - - -   | 2  | Ascites - - - - -       |    | 3 |
| Enteritis - - - - -   | 1  | Anasarca - - - - -      |    | 4 |
| Rheumatismus Acutus - | 5  | Hydrothorax - - - -     |    | 3 |
| CHRONIC DISEASES.     |    | Hæmorrhoids - - - -     |    | 4 |
| Tussis - - - - -      | 10 | Rheumatismus Chronicus  | 14 |   |
| Dyspnœa - - - - -     | 5  | PUERPERAL DISEASES.     |    |   |
| Tussis cum Dyspnœa -  | 17 | Menorrhagia Lochialis - | 6  |   |
| Hæmoptysis - - - - -  | 2  | Ephemera - - - - -      | 4  |   |
| Phthisis Pulmonalis - | 4  | Abscessus Mammaræ -     | 1  |   |
| Hepatitis Chronica -  | 2  | INFANTILE DISEASES.     |    |   |
| Scrophula - - - - -   | 3  | Pertussis - - - - -     | 7  |   |
| Chlorosis - - - - -   | 5  | Ophthalmia - - - - -    | 3  |   |
| Paralysis - - - - -   | 2  | Spina Bifida - - - -    | 1  |   |
| Cephalalgia - - - - - | 5  | Herpes - - - - -        | 5  |   |

The patient referred to in the list, as afflicted by convulsions, was frequently attacked by symptoms very nearly resembling those which sometimes precede the epileptic paroxysm. Epilepsia, indeed, in most instances, occurs so suddenly, as hardly to give any warning to the patient himself, or to those who are near him; but at other times the disease is preceded by some milder symptoms, and a giddiness, tinnitus aurium, pain of the head, palpitation of the heart, and slight spasmodic affections in different parts of the body, introduce the complete paroxysm. Several of these symptoms occurred in the case referred to. Considerable pain in the head usually accompanied the convulsive twitches in the face, and other spasmodic affections.

Being informed that medicines of the antispasmodic class had been very liberally administered, without procuring any relief, leeches were directed to be applied to the temples. From this evacuation considerable relief was obtained; and the bowels being kept open by gentle ecoprotics, the patient continued free from his complaint during a longer interval than he had before enjoyed.

Upon a return of the symptoms, leeches were again applied to the temples, and a blister was placed behind each ear, and kept open for a considerable time by ung. Sabin. since which he has not had any return of his complaint.

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

A Delicate female, ætat. 25, sent for me on the 19th of May, who I found labouring under a complication of diseases; she had been for some time subject to dysentery, and now was seized with a more formidable and alarming complaint, namely, pneumonia; inspiration was attended with the most acute stitch of her right side, and she was obliged to be propped up in bed, not being able to endure a recumbent posture; her pulse was full and frequent, countenance flushed; and though she was much debilitated by the alvine discharge, phlebotomy appeared to be the only remedy calculated to afford relief in this dilemma; I therefore took from her arm twelve ounces of blood, sent her a refrigerant medicine, and left the strictest injunctions respecting her regimen.

On the following day, the smallest amendment was not perceptible; the stitch, purging and pyrexia continued with unabated violence. I now determined to give the *tinct. digitalis* a fair trial, but thought I should not be justified by leaving my patient in so much distress, without again availing myself of the advantage of another bleeding; I accordingly drew off eight ounces more, and sent her a blister, to be applied to the part, with these draughts: R. Spt. æth. nitrosi ʒj. *tinct. digitalis* gtt. 40, aq. puræ ʒij. M. ft. haust. mitte no. ij. cap. j. bis de die. In the evening I visited her, and sent another nitrous draught, omitting the *digitalis*, not wishing to push it any further the first day.

On the 21st, I found her in a recumbent posture, inclining to her right side; she said the smallest movement from the present position, occasioned inexpressible torture; her countenance was less flushed, and her skin felt moist, but she observed that the stitch was as bad as ever; she neither could bear any one to move her, nor could she alter her position. Let me ask any of my medical brethren, if a repetition of bleeding was not plainly indicated, according to the received opinion of all authors; and such treatment would have been considered sound practice, and would most assuredly have been adopted by any one, whose experience had not taught him, that there yet remained a remedy, which surpassed the most sanguine expectations that could have been conceived of it, in the cure of

( No. 66. ) I phthisis

phthisis pulmonalis; and reasoning ipso facto, about the *modus operandi ejusdem medicaminis*, in this disease, would be encouraged to hope for success from its administration in pneumonia also. As her purging and tenesmus still remained, I this day increased the *digitalis* to gtt. 100, (omitting the *spt. æther nitros.*) which she took at three different periods, that is, to gtt. 33 to a dose.

The 22d, she was able to alter her position, and observed the air descended further into her lungs, though a hasty inspiration could not have been endured. Her pulse had sunk considerably; her face bore evident marks of anasarca, its enlargement and puffy feel being noticed by herself and every one who saw her. I had sufficient cause to congratulate myself on the resolution I formed, of abandoning the use of the lancet, although the last blood I took away, exhibited that cup-like appearance so frequently observed, having the edge of the crassamentum curled in, and its whole surface covered with a very thick crust of coagulable lymph. The same quantity of *digitalis* was continued this day.

The 23d, she was able to set up in bed, respiration became easy, and she only complained of soreness in the part; her pulse was now about 60, and as the danger from inflammation vanished, I began to direct my attention to the state of her bowels; the aliment passed off almost as fast as it was received; pain and tenesmus she still suffered greatly from. R. Tinct. opii gtt. 40, *digital.* gtt. 30, aq. puræ ʒij. M. ft. haust. horâ decubitûs sumend. I have an idea that *digitalis* counteracts the stimulant effects of opium, which was my reason for combining them in this instance.

The 24th, she passed a tolerable night, and to day took the two following draughts. R. Tinct. opii, gtt. 30; *digital.* gtt. 20, aq. puræ ʒij. M. ft. haust. A. M. et horâ somni.

The 25th, her motions were less frequent. I now omitted the *digitalis*, and gave her pulv. ipec. comp. gr. viij ter de die; this medicine by the assistance of cret. ppt. occasionally conjoined, with a generous diet, completed the cure.

On the 4th of June she was free from every complaint, debility excepted, continuing to regain lost stamina. I forgot to mention that this woman was suckling a stout boy, twelve months old, which I prevailed upon her to wean.

Another instance of pulmonic inflammation occurred to me the other day, occasioned by living freely, and blowing too much upon musical instruments. My patient was a young

young miller, attached to a volunteer corps; and in this case the digitalis was crowned with the same success; in less than twenty-four hours, his pulse, which had been at 120, was reduced to 60; his countenance though highly crimsoned, by the same mean, was changed to its natural aspect.

I have to observe, when we are called in to visit patients in this acute and dangerous disease; that it would be improper to trust entirely to the effects of digitalis, because some time will elapse before it exerts its influence in the body, so as to check the undue impetus of the blood; but as no time can consistently with the safety of the patient be lost, I conceive it ought to be administered immediately after the first bleeding, in a quantity proportioned to the urgency of the case, and it will frequently happen that a second bleeding may be requisite, before this potent sedative has effected our purpose.

I imagine it operates chiefly on the nervous system, and is indued with the peculiar property of restraining morbid excitability, or in reducing the increased mobility of the vital principle to its proper level and healthy standard. How often the lancet has been, and is still, used in pneumonic cases, is too well known to every practitioner; and who is there that has not witnessed the melancholy effects emanating from this mode of depletion? pining *atrophy*! lingering *dropsy*! and a variety of evils, occurring so frequently, as to render a particular account of them in this place quite unnecessary, occasioned entirely by robbing the body of that *pabulum*, which is the sine qua non of its existence.

I think it fair to conclude, that my female patient, who was nearly worn thread-bare by disease, previously to her having been seized with pneumonia, would in all probability have died dropsical, if the lancet instead of digitalis had been solely confided in. Then, what inferences may be deduced from this conclusion? The happiest presages may surely be formed of its salutary effects, when employed as frequently as its virtues demand it should be.

This medicine admits of more extensive application than many may suppose; in *asthma*, it will afford great relief. I had a patient the other day, to whom I administered the remedies generally used on these occasions, without deriving any advantage from them; but as soon as he took this medicine his health improved daily. It is in this complaint as well as many others, that theory and practice are at variance, yet I must say, according to the opinion I

have formed of it, that the *Materia Medica* cannot boast of a medicine, which does in a general way more effectually fulfil every intention, considered in a pathological point of view. Some time ago, I used it in ascites and anasarca: A man, aged fifty-five, who laboured under an intermittent a considerable time, in Essex, was so much reduced by it when he applied to me, that I formed a very unfavourable prognosis of him; the cells of the adipose membrane from head to foot were filled with water, and the *abdomen* so much distended that it did not contain less than three gallons of fluid. His intermittent, a quotidian, was easily cured by *zinc. vitriol.* (a medicine which I took occasion to recommend the other day in your Journal) gr. v. indies; after which, he took squills, calomel, &c. rubbing in ung. hydr. fort. during this course. The squills, though given in liberal doses, were of no avail in discharging the water; but as soon as *digitalis* was employed, the extravasated fluid soon made its exit, in copious quantities, and the man is now enjoying good health, free from any appearance of fresh accumulation.

As the human mind is ever liable to run into extremes, outstripping the boundaries of calm and dispassionate reason; I wish to observe, that the high opinion which I entertain of this remedy, is founded on the unerring test of experience, the guide and polar star of every science, and which is the only rational way by which we can hope to attain to any mode of improvement in Physic, that in so many instances is veiled by a mist, through which the brightest beams of human understanding cannot penetrate.

After having most faithfully represented cases in support of this excellent medicine, where its effects must appear so evident and striking, as to defy and put keen edged casuistry to the blush; need I fear the snarls of the incredulous, or care for the distempered remarks of the idle disputant, who more for the sake of displaying his controversial powers, than benefitting society, so frequently takes shelter under a borrowed name, and thus cowardly, when secure behind the bastion of obscurity, lets fly his envenomed shafts.

There are men whose timidity prevents them from venturing out of the beaten track of their predecessors; it is not from *such* that we can expect improvements, particularly in Physic, where so much remains to be done; for as a Professor properly observes to his pupils, "Your present instructions are only intended as a foundation, on which you are to build." As if conscious of innumerable difficulties,



difficulties, which must ever remain insurmountable, should the mind not be suffered to soar beyond the narrow limits of scholastic dogmas.

De tuo ipsius studio conjecturam ceperis  
An veritas aut perfidia hanc mentem gubernat.

I shall conclude with a borrowed phrase reversed, me-  
hercule digitalis sedat! I am, &c.

Romsey, Hants, July 1, 1804.

RALPH CUMING.

# ON THE PRESENT STATE OF OUR KNOWLEDGE OF OPIUM.

By A. F. GEHLEN, of Berlin.

( Continued from our last pp. 38—44. )

MR. JOSSE likewise remarks, that the water with which opium is washed, and which contains the extractive matter in solution, becomes fatty, and that also the surface of the glutinous matter remaining on the filtrum is covered with a coloured fatty cuticle, which he takes to be merely accidental, as he thinks it may be derived from the oil or fat with which those persons who prepare the opium-cakes in Asia anoint their hands. This opinion, however, is by no means probable, particularly as the late observations of Derosne and Proust, have evinced that an oily matter is really contained in opium. Proust thinks it to originate from the pollen of papaver, thus partaking of the nature of wax. This conjecture is confirmed by Mr. Derosne's method of obtaining it. After having several times extracted the opium with water and then with alcohol in gentle heat, he let alcohol boil with the residuum, and filtrated the liquor, which on cooling deposited an oily solid black brown substance. This being again dissolved in boiling alcohol, it was also precipitated on cooling in a very divided form and with a yellowish grey colour. It is now known to be a property of wax, that it dissolves in boiling alcohol, but is again separated on cooling. Mr. Derosne obtained from one pound of opium about an ounce of this substance, which, as this gentleman says, imparts the particular smell to opium, and is the only constituent that retains it, while the other constituent particles entirely lose this odour. Hence it may be explained, why Mr. Josse could ascribe the smell and stupifying qualities of opium to what he calls gluten, as this oily substance could not be separated from it, according to his manner of proceeding.

Another substance, which has been likewise overlooked in some of the modern analyses, is a particular saline matter, already noticed by Neumann, Hoffmann, and Tralles, who thought it to be an acid; an opinion lately renewed by Mr. Proust. The observations however which Mr. Derosne has published on this subject are the following. He extracted opium with ten times its quantity of distilled water, which operation he repeated till all the parts soluble in water were separated, and he gently evaporated the liquors, which he had thus obtained, to the consistency of a thick syrup. On cooling, the thick liquor became granulated, which seemed to indicate the presence of a separated substance. On diluting it with four parts of water it appeared turbid, and a considerable sediment was separated on the bottom of the vessel. The liquor being decanted and again evaporated, still yielded a small portion of it. After having collected it on the filterum and washed it, it showed a dark brown colour, and at the first sight seemed to be composed of resin and oxydated albuminous matter; but on examining it more closely, it appeared to consist of an innumerable quantity of small shining crystals. Boiling water drew out of it a small portion of extractive matter. Alcohol, when boiling, dissolved them, but on cooling deposited them again in a crystalline form. The same substance may be obtained by treating the residuum, which is not soluble in water, with alcohol.

Mr. Derosne having digested it with six parts of alcohol, in a heat of  $35^{\circ}$ — $40^{\circ}$  Reaumur, filtrated the dark red liquor when still warm, which on cooling deposited crystals. By repeated solution of this substance in alcohol and crystallisation it is obtained quite pure and free from resin and the abovementioned oily matter. One pound of opium yields about 40 grammes French weight. In this state, purified by repeated crystallizations, opium appears white and crystallized in regular fascicles or prisms. It is without smell and odour, not soluble in cold water, but dissolves in 400 parts of boiling water, from which however it is again precipitated on cooling. Tincture of turnsol is not reddened by it. It requires of boiling alcohol about 24 parts for solution, but in the cold about 100 parts. One of the most distinguishing characters of this substance is its easy solubility in acids, vegetable as well as mineral, without the assistance of heat. On saturating such a solution with an alkali, that substance is precipitated in form of a white powder. It is made somewhat soluble in water by caustic alkalies; but it is precipitated from this solution by adding

ing a small portion of an acid. It is dissolved by ether and volatile oils in the warmth, but separates again in a liquid oily form, and shoots soon after into crystals. Thrown on living coals it takes fire, and burns with the same flame as other combustible vegetable substances do. When heated in a spoon it gradually melts like small pieces of wax. When exposed in a retort to a gradually increased fire, it begins to melt and to puff up, whereby the retort is filled with white fumes which are condensed near the neck of the retort as an oily yellowish substance, and at the same time some phlegma with carbonat of ammonia passes over. Towards the end of the operation carbonic acid gas, dry ammonia, and carbonated hydrogen gas are disengaged, while there remains in the retort a voluminous, light, spongy, and shining coal. The oily substance deposited in the neck of the retort is very tough, and possesses a particular aromatic smell and an acrid taste. Nitric acid poured on the grossly pulverised crystals imparts to them a reddish colour, dissolving them afterwards with great ease. The solution, heated and evaporated, yields crystals of oxalic acid in a proportionably great quantity. The residuum of the solution is very bitter.

From the just mentioned properties of this substance, Mr. Derosne thinks himself entitled to consider it as a particular matter, and as a new proximate constituent of vegetables; and he remarks, that on account of those properties it can be no acid, as has been maintained by some chemists. The easy solubility of this substance, and likewise of the resinous and oily particles of opium in acids, may account for the action of vinegar, employed as an antidote of opium, and he believes that other acids operate in the same way, and are capable of preventing the deleterious effects of opium by dissolving those difficultly soluble parts of that substance. This opinion is contrary to that of Mr. Josse, who thinks acids to be very prejudicial to the body when opium has been given, as deleterious substances have a greater efficacy in a dissolved form; Mr. Derosne, however, assures us, that he has administered from six to eighteen grains of opium to dogs, which were all affected with the symptoms attending too great a dose of that substance, but most of them were relieved and cured by giving them vinegar.

Caustic and carbonated alkalis produce a copious precipitation in the aqueous solution of opium; Mr. Proust considers this precipitate as pure resin, but Mr. Derosne thinks it to be a compound substance. He added to a

solution of opium in six parts of water, prepared in the cold, a solution of carbonat of kali, till nothing was precipitated. The remaining liquor, after being a little evaporated, yielded another small portion of that precipitate, which, when washed with cold water, had a greyish colour, a granulated appearance, and not much taste. Boiling alcohol dissolved about three-fourths of it, and received a dark red colour; and the solution being filtrated, yielded on cooling, an irregular reddish crystallization. The remaining alcohol contained another small portion, which could be separated by evaporation. The part which had been insoluble in alcohol was dissolved in boiling water; the solution had a dark colour, but on cooling a white powder fell to the bottom, which after beingedulcorated and dried, was insoluble in boiling water, but thrown into a red hot crucible burned with a variously coloured flame, leaving behind carbonat of lime with a little kali. The same result was observed in that part which remained insoluble in water, on being dried and burnt. The part of the precipitate produced by alkali, which was insoluble in alcohol, consists consequently of lime, and a vegetable matter. The crystalline substance separated from the alcohol was the same which I have above mentioned, though it showed some difference, arising from the different manner of obtaining it. Its taste is a little bitter; it does not crystallize so regularly, and it seems to be more soluble; its solution changes the blue colour of the *syrupus violarum* into green. Being heated it crackles before it melts. Its solution in alcohol is not rendered turbid by the addition of water, but some time after small crystals appear in the liquor. The dry distillation yields the same results as have been above mentioned, except the remaining coal being less voluminous, and containing after the incineration more alkali, which seems to account for the little differences observed between this and the foregoing substance.

The aqueous solution of opium reddens the tincture of turnsol, according to Mr. Derosne, thus indicating the presence of an acid. He thought to discover the latter in the alkaline liquor, standing over the precipitate produced by alkali, on which account he evaporated the liquor to the consistency of a syrup, and suffered it to stand for several days, in order to produce a crystallization. Some time after crystals were found to be formed in the liquor, but they were few, and so combined with the extractive matter, that Mr. Derosne could not examine them.

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On the whole, he thinks that the acid present in opium is nothing else but acetic acid, which is so frequently met with in other vegetable extracts. Besides those crystalline substances, the watery extract of opium contains, according to Mr. Derosne's researches, extractive matter and resin, which last is contained in it in a greater proportion, when the solution is made more concentrated, because the extractive matter renders the resin soluble. The latter however separates from the watery solution, by evaporation, to the consistency of a syrup, and by dissolving the extract again in form of a soft tough mass, which afterwards hardens. It may be perfectly separated by a proper treatment with alcohol, whereby part of it remains insoluble, which Mr. Derosne takes for oxydated extractive matter, and Mr. Buchholz for a close combination of resin with gluten. Lastly, the watery solution of opium contains some sulphat of lime and sulphat of kali, which may be separated by alcohol or by the incineration of the extract. The residuum of opium, which has been extracted with water and alcohol, consists of vegetables, frequently mixed with sand and small stones, from which, according to Mr. Derosne, a small portion of amylum, of mucilage and gluten may be extracted by boiling water. Mr. Buchholz obtained from the residuum, kaoutshouc, by treating it with ether.

From all those experiments and observations respecting the nature of opium, the following results may be drawn.

1. It is not yet sufficiently known in what manner opium is prepared in Asia, nor is it probable that common opium is the juice extilled from the poppy heads, inspissated in the air; as, according to Mr. Dubuc's observations, the juice spontaneously extilling from the capsules is not possessed of the narcotic smell, which common opium always possesses. The observations of Dubuc, and of Kuhn, lead us to conclude, that the opium extilling from the incisions of the capsules is kneaded and mixed with the fermented mass of squeezed poppy heads and leaves, and afterwards wrapt in the leaves of the plant.

2. Opium is a very compound substance. Besides the volatile narcotic principle, it contains *extractive matter*, *mucilage*, *resin*, and, according to several observations, an *oily matter*, resembling wax, to which the narcotic and deleterious properties of opium are by some particularly ascribed; farther, a *crystalline substance*, which is neither of a saline nor an acid nature; a *substance* similar to the albuminous matter which is separated from green vegetable

ble juices, and which some consider as *gluten*; a small proportion of *kaoutshouc*, and the remainder of different vegetable particles. The proportion of these constituents seems not always to be the same; and from want of comparative examinations, it is not as yet ascertained whether all sorts of opium contain the same constituents, some of which undoubtedly require farther examination.

*Letter from Dr. De Carro, to the Editors of the Bibliothèque Britannique.*

GENTLEMEN,

YOU have seen by my preceding letters, and my work on Eastern vaccination, what a rapid progress that happy discovery has made in Asia. Hitherto we have not heard that it was extended into the peninsula of Indostan; but a letter from Bombay informs me, that the vaccine practice is general from Cape Comorin to Delhi. I have just experienced a fresh gratification; that of having laid the foundation of the same practice in Persia. The occasion was as follows.

Dr. Milne, who is attached to the English factory at Bassora, after inoculating a great number of the children of that city, had experienced an interruption in procuring a supply of fresh matter, and had trusted to impregnated threads, lancets, and glasses. Having to his great mortification, found all these means fail, he wrote to me in the month of May last, earnestly requesting me to send him some matter by the earliest opportunity. With the utmost care, I collected it on ivory lancets, and impregnated lint with it, according to the excellent method of Messrs. Ballhora and Stromeyer. Meanwhile, Dr. Milne was obliged to quit Bassora, and to repair to Bashire or Abusheher in Persia. My packet, which was dispatched from Vienna at the beginning of August, not finding him at Bassora, was forwarded to him at Bashire, where it arrived about the end of November. Dr. Milne and Mr. Jukes, an English surgeon, who despaired of success with matter nearly four months old, were agreeably surprised to find the lint impregnated with a matter that was yet liquid, and which produced the desired effect the first time they made trial of it. The ivory lancets, on the contrary, produced no effect at all.

I know not, in the history of the cow-pox, any more  
satisfactory

satisfactory examples of the benefit arising from care and attention in the manner of collecting the vaccine matter, than the success of the packets which I sent some time since to Bagdad and lately to Bashire. We have seen the incalculable benefit produced by the former; and I have every reason to hope, that the latter, which has been so happily transmitted to Persia, will produce effects equally salutary in that extensive and celebrated empire.

Dr. Milne and Mr. Jukes write me from Bashire, on the 11th and 15th of January, that their first success has made the most powerful sensation in that town, which now carries on the greatest trade of any in the empire; and that the people flock to them to have their children vaccinated.\* They likewise inform me, that a mission is on the point of setting off for Tehran, the seat of the government, and that Mr. Jukes, who is to accompany it in the quality of surgeon, has taken the most effectual measures, to procure the patronage of the governors of provinces in favor of the cow-pox, and even to explain the history of its utility to the sovereign to whom they will be presented. I am extremely impatient to receive farther accounts of this expedition. Mr. Jukes has engaged to correspond directly with me. Dr. Milne, who has been called to Bombay, is succeeded at Bassora by Mr. Donald, who purposes doing all that lies in his power to promote the propagation of the cow-pox. The East India Company has taken into consideration my endeavours to introduce the vaccine practice into the British settlements; and the Secretary to the Court of Directors at London, has acquainted Mr. Paget, the Ambassador from England to the Court of Vienna, in a letter

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\* This is not yet the case in Europe, though so proud of her superiority in knowledge over the natives of the East. In a country where the government has bestowed the utmost attention to render vaccination general, the small-pox still continues to make dreadful havoc. The Canon Gattoni informs me, that in the small town of Como, his native place, notwithstanding the repeated invitations of the government, the exhortations of the clergy, the zeal and persuasions of Dr. Carloni, a physician appointed for the purpose of diffusing the vaccine practice, the intrigues of a few ignorant and envious professional men still prevail to such a degree, that in the two last months of 1803, nearly three hundred children, whose parents had obstinately refused to suffer them to be inoculated with the vaccine, were carried off by the small-pox. The government testified its grief on the occasion by a solemn proclamation. But as the distemper spared all the children who had been vaccinated, it is to be hoped that such a striking instance of the excellence of this preservative will not be lost, but will prevent the recurrence of similar disasters.

letter dated December 9, 1803, that the Directors have voted two hundred guineas to purchase a piece of plate for me.

Now I am speaking of presents, I have likewise received from the Hospodar of Moldavia a superb Indian shawl, which his serene highness accompanied with an extremely obliging letter that he was pleased to write me, and in which he gives me an account of the efficacious measures he has taken to propagate the cow-pox in that principality.

Vienna,  
March 27, 1804.

I am, &c.

J. DE CARRO.

## Botanical Description of British Plants.

( Continued from our last, pp. 28—37. )

### CLASS V. PENTANDRIA.

#### Pentandria, Monogynia.

1. LITHOSPERMUM. *L. arvense. L. Vulgare. Anchusa degener.*

*Ang.* Bastard gromill, salern, corn gromwell, painting root, bastard Alkanet.

*Gen. Desc.* Bloss. funnel-shaped, tube long, slender, open, without valves at the mouth. cal. 5-div. nuts 4, very hard, imperforated.

*Spec. Desc.* *Seeds* wrinkled, generally 3 perfect with 1 abortive. *Bloss.* hardly longer than the cup, white. *Roots* crimson red, *corn fields.* *Bloss.* May, June.

*Use.* The girls in the north of Europe use the juice of the bright red roots of this plant for the purpose of painting their faces on days of festivity. The bark of the root tinges wax and oil of a beautiful red colour, similar to that obtained from the foreign alkanet root, which is sold in the shops. Sheep and goats eat it; cows are not fond of it; horses and swine refuse it.

2. CYNOGLOSSUM. *C. officinale. C. vulgare.*

*Ang.* Great hound's tongue.

*Gen. Desc.* Bloss. funnel shaped, mouth closed by projecting valves; nuts 4; depressed, fixed to the style by the inner side only, imperforated

*Spec.*



*Spec. Desc.* Stamens shorter than the blossom. Leaves broad strap-spear-shaped, sitting, cottony; the whole plant downy; cal. segments oblong egg-shaped. Bloss. marone colour; valves fringed. Road sides, rubbish. Bloss. June.

*Use.* It is succulent and somewhat mucilaginous, especially the root, which, for medicinal purposes, is preferred to the leaves. It is reported to be *deleterious*, and the dingy lurid appearance of the leaves, peculiar to poisonous shrubs of the narcotic kind, favours the opinion; nor are facts wanting to confirm it. A whole family, eating it by mistake for comfrey, severely experienced its ill effects. (*See Morrison Hist. Oxon. III. 450.*) Experience has not yet determined how far it may be employed as a medicine. Dr. Hulse is said to have prescribed a decoction of roots internally, together with a poultice of them, to *scrophulous tumours* with safety and advantage (*Ray, l. c.*). For its use in *coughs, hæmoptysis, diarrhæa, dysentery*, see *Schreckius, Diss. de Cynoglosso*, and *Woodville*. Both the root and the leaves have been suspected to possess *narcotic* properties, but some will not admit the fact: it was formerly kept in the shops as a *pectoral* and *narcotic*, but it is discarded from the present practice. Mr. Ray says, however, that Dr. Hulse used a decoction of the roots inwardly, and cataplasms of them outwardly, in *strumous* and *scrophulous* cases. Its scent is very disagreeable, and greatly resembles that of mice—*Withering*. Goats eat it; cows, horses, sheep and swine refuse it.

3. SYMPHYTUM. *S. officinale. S. consolida major. S. vulgare.*

*Ang.* Comfrey, common comfrey.

*Gen. Desc.* Bloss. funnel-shaped, bellying towards the top; mouth closed by hollow radiate valves, having an open hole on the outside near the border; nuts 4, perforated.

*Spec. Desc.* Leaves egg-shaped, decurrent. cal. close. Bloss. yellow-white; tube as long as the calyx; valves spear-shaped; flat, covering the anthers; edge studded with small shining glands. River-banks, wet ditches. Bloss. May.

There is a variety with red flowers.

*Use.* The root of this plant is a powerful *agglutinant*, good in the *fluor albus*.—*Hill*. The root is very mucilaginous; and being rather superior to the althæa, and more easily obtained, may be usefully substituted in its place, for

for the general purposes of an *emollient* and *demulcent*. *Woodville*. Dr. Cullen says, there is no reason why, while mucilaginous matters are retained in our lists, *symphytum* should be omitted. It may be of service, as alleged, in *diarrhæas* and *dysenteries*. The roots are glutinous and mucilaginous: a decoction of them is used by dyers, to extract the colouring matter of guin lac. The leaves give a grateful flavour to cakes and panada; and the young stems and leaves are excellent when boiled. The particles of the *pollen* appear in the microscope like two globules united together. Cows and sheep eat it; horses, goats, and swine refuse it. *Linn.*

4. *BORAGO. B. officinalis. Buglossum latifolium.*

*Ang.* Common borage.

*Gen. Desc.* Bloss. wheel-shaped; mouth closed with rags; nuts 4, imperforated.

*Spec. Desc.* *Leaves* alternate, egg-spear-shaped, rough, as well as the stems, with white prickly hairs. *Bloss.* blue, white, or flesh colour, segments spear-shaped; *anthers* black; *filaments* above the insertion of the anthers, cylindrical, dark blue; below, thick, brown, glandular. *Walls, rubbish.* *Bloss.* June, August.

*Use.* The flowers have been termed *cordial*, and hence formerly much recommended in *melancholia*, and other affections of the nervous system. But as they possess neither pungency, warmth, nor fragrance, and as no saline matter appears to be contained in the flowers, any advantage supposed to be derived from a vinous infusion of them, can only be attributed to the menstruum. The leaves abound with a saltish juice, which on being boiled a sufficient time, forms crystals of nitre; hence the plant may be inferred to possess *refrigerating* and *aperient* virtues. *Woodville.*—The juice of this plant affords a true nitre. See *Experim. of M. Marggraff, Mem. de Berlin, 1747, p. 72.*—It is now seldom used internally, except as an ingredient in cool tankards for summer drinking; though the young and tender leaves are good in salads, or as a pot herb—*Withering.* A horse eat it.—*Dr. Stokes.*

5. *PRIMULA. P. vulgaris. P. veris acaulis. P. sylvestris.*

*Ang.* Primrose.

*Gen. Desc.* Bloss. tube cylindrical, mouth open, stem within the tube; caps. 1-celled, cylindrical, many seeded, opening with ten teeth; summit a knob.

*Spec. Desc.* *Leaves* wrinkled, toothed; border of the blossom flat; leaf-stalks, when fully grown, longer than the

the leaves. *Woods, hedges, thickets, heaths.* Bloss. April, May.

*Use.* Of the roots, taken up in Autumn, and dried, a drachm and a half, according to Gerard, operates as a strong but safe *emetic*. Silk-worms may be fed with the leaves of the primrose. *Trans. Soc. of Arts.* Sheep and goats eat it; cows are not fond of it; horses and swine refuse it. *Linn.*

6. PRIMULA. *P. officinalis.*

*Ang.* Cowslip. Cowslip primrose. *Pagils.* Paigles.

*Gen. Desc.* As above.

*Spec. Desc.* Leaves wrinkled and toothed; stalk many-flowered. Blossom sweet scented, full yellow, an orange blotch at the base of each segment contracted at the middle of the tube, where the stamens are inserted; flowers drooping; border of blossom concave. *Meadows, pastures, in loamy or clayey soil.* Bloss. April, May.

*Use.* The leaves are sometimes eaten as a pot-herb and in salads. The blossoms are used for making cowslip wine. The root has a fine scent like anise—*Withering.* Silk-worms are fond of the leaves and flowers. *Trans. Soc. Arts.*

7. MENEANTHES. *M. trifoliatum.* *Trifolium paludosum.* *Acopa.* *M. palustre tryphillum.* *Trifolium fibrinum.*

*Ang.* Marsh trefoil. Water trefoil. Marsh cleaver. Trefoil buckbean.

*Gen. Desc.* Bloss. hairy or fringed; nect. 5, at the base of the germen. Summit 2 lobed; caps. 1 celled.

*Spec. Desc.* Leaves by threes, spear-egg-shaped. Bloss. pinky and white, in a spike-like bunch, a floral leaf at the base of each pedicle; blossom segm. entire at the edge, shaggy on the upper surface. One of the most beautiful of our native flowers. *In ponds and pits frequent.* Bloss. June, July.

*Use.* An infusion of the leaves is extremely bitter, and is prescribed in *rheumatisms* and *dropsies*. It is sometimes given to destroy worms—*Withering.* The blackness manifested by adding a solution of green vitriol to the juice, or to a strong infusion of the leaves, is a sufficient test of its *astringency*; while a drachm of the powdered leaves seldom fails to produce purging, or vomiting; so that in common with the tonic properties of a bitter, it seems also to possess a considerable share of medicinal activity. Its success in a number of chronic diseases is mentioned by various authors, as in *scurvy, dropsy, jaundice, asthma, periodical*

*periodical head-achs, intermittents, hypochondriasis, cachexia, obstructio mensium, rheumatism, schrophula, worms, gout.* In gout, Dr. Boerhaave was relieved by drinking the juice mixed with whey: and Dr. Alston says, that this plant had remarkable effects in the gout, in keeping off paroxysms; though, he adds, not to the patient's advantage. Bergius confines the uses of this plant within narrower limits, and by later writers they have been still farther contracted. In Lewis's *Mat. Med.* (*by Dr. Aikin*.) it is said, "the leaves of buckbean have of late years come into common use as an *alterative* and aperient, in impurities of the humours, and some hydropic and rheumatic cases;" and as an active and eccoprotic bitter, we should suppose them not ill adapted to supply the want of bile in the *primæ viæ*, and thus infer their use in protracted jaundice and other biliary obstructions. Dr. Cullen had several instances of their good effects in some cutaneous diseases of the herpetic and seemingly cancerous kind. The leaves may be given in doses of ℥i. to ℥ij. two or three times a day, but a strong infusion of them is perhaps to be preferred, and with delicate stomachs it may be necessary to conjoin a grateful aromatic. These leaves impart their properties both to watery and spirituous menstrua—*Woodville*. This plant is regarded by the northern Europeans as a certain panacea for the cure of all diseases—*Ray*. The Highlanders in Scotland esteem a tea made of the leaves, as a good strengthener for a weak stomach—*Lightfoot*. In the north of Europe this plant has been used, in a scarcity of hops, to bitter ale instead of them, two ounces being equal to a pound of hops, so extremely bitter are they; yet Linné observes, that in Lapland the poorer people make bread of the powdered roots mixed with meal, which, however, he acknowledges to be very unpalatable food. Some people smoke the dried leaves. As a proof of its good effects in dropsies, it has been said that sheep being forced to eat it, have been cured of the rot by it—*Woodville*. But it appears from the Upsal experiments, that sheep will seldom eat it; goats eat it; cows, horses, and swine refuse it—*Withering*.

8. ANAGALLIS. *A. arvensis*.

*Ang.* Pimpernel, Male pimpernel.

*Gen. Desc.* Bloss. wheel-shaped, caps. cut round, 1 cell, many seeds.

*Spec. Desc.* Leaves egg-spear-shaped. Stem trailing. Calyx, segments spear-shaped; Bloss. scarlet, sometimes blue. Corn-fields, sandy places. BLOSS. May, Aug.

*Use.*

*Use.* This plant is esteemed an *alexipharmic* and *sudorific*, but it is very little used. *Hill.*

9. CONVULVULUS. *C. sepium.*

*Ang.* Great bindweed.

*Gen. Desc.* Bloss. bell-shaped, plaited. Nect. surrounding the base of the germen. Summits 2; caps. 2 or 3 celled, 2 seeds in each.

*Spec. Desc.* Stem twining. Leaves arrow-shaped, lopped at the base, edges brown. Fruit-stalk 4-cornered, 1 flower. Bloss. white; floral leaves 2, close to the cup.

*Moist hedges.* Bloss. July, Aug.

*Use.* The inspissated juice of this plant, in doses from 20 to 30 grs. is a powerful drastic *purge*. Scammony is the inspissated juice of the root of a foreign species of convulvulus, but so much resembling this, that they are with difficulty distinguished. Though an acrid purgative to the human race, it is eaten by hogs in large quantities without any detriment. Sheep, goats, and horses eat it; cows refuse it.—*Withering.*

10. CONVULVULUS. *C. Soldanella.*

*Ang.* Scottish scurvy grass. Sea colewort. Sea bindweed.

*Gen. Desc.* As above.

*Spec. Desc.* Stem not twining, in open ground short, lying flat, and taking a semicircular direction; among bushes growing to some length embranched, bearing no flowers. Leaves kidney (sometimes heart) shaped. Fruit-stalks with 1 fl. Bloss. red. Leafstalks long. Sea shore. Bloss. July.

N. B. It grows at a distance from the sea, but not above half its usual size.

*Use.* Of the juice, half an ounce, or a drachm of the powder, is an acrid *purge*. The leaves applied externally are said to diminish dropsical swellings of the feet.—*Withering.*

11. CAMPANULA. *C. rapunculus.* *Rapunculum.*

*Ang.* Rampions.

*Gen. Desc.* Bloss. bell-shaped. Filaments broad and arched at the base. Summit 3-cleft. caps. beneath; 3-celled, opening at 3 lateral holes.

*Spec. Desc.* Leaves waved, smooth, narrow; root-leaves spear-oval; panicle compact; fruit stalks by threes. Stem angular, rough, with milky juice. Bloss. large, purplish blue, nearly upright, not expanding; segments marked each with 3 red lines. Hedge banks, fallow fields. Bloss. July, August.

( No. 66. )

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*Use.*

*Use.* The roots are often eaten raw in salads, or boiled in the manner of asparagus. In gardens they are branched. The shoots of the *c. latifolia*, the beauty of whose flowers procures it a place in gardens, are boiled, the skin being stripped off, and eaten as greens about Kendal; it abounds also with milky liquor.—*Withering.*

12. LONICERA. *L. xylosteum.*

*Ang.* Upright honeysuckle.

*Gen. Desc.* Bloss. one petal, tubular, irregular; berry beneath, one to three-celled; many-seeded.

*Spec. Desc.* *Fruit-stalks* two-flowered, opposite, axillary. *Berries* distinct. *Leaves* very entire, pubescent, mostly egg-shaped, in opposite pairs, three pair on each branch, soft, and cloth-like to the touch. *Blossom* yellow, upper lip four-cleft, lower lip entire, strap-shaped. *Filaments* woolly. Shrub six or eight feet high. Bloss. May.

*Use.* Linnæus says this plant makes excellent garden hedges in a dry soil; and that the clear parts between the joints of the shoots are used in Sweden as tubes for tobacco pipes; the wood being very hard makes teeth for rakes, &c. It is rare, though certainly a native, in England.

13. VERBASCUM. *V. thapsus. V. album. Thapsus barbatus.*

*Ang.* Great white mullein. High taper. Cow's lungwort. Lady's fox glove.

*Gen. Desc.* Bloss. wheel shaped, nearly-regular; caps. two-celled, two-valved, many seeded.

*Spec. Desc.* *Leaves* decurrent, cottony on both sides. *Stem* unbranched, from four to six feet high. *Summits* globular. *Flowers* in a long terminating spike. *Blossom* yellow, rarely white. *Dry banks, chalky or gravelly soil.* Bloss. July.

*Use.* The leaves have an herbaceous, bittering, substringent taste, but peculiar smell; on being chewed they discover a mucilaginous quality, and hence they are recommended as *emollients* both internally and externally; in the way of fomentation and cataplasin they are said to be an useful application to hæmorrhoidal tumors; and also for promoting the resolution or suppuration of glandular indurations; it has been recommended internally for catarrhal coughs and diarrhœas; Dr. Home found it successful only in the latter.—*Woodville.* In diminishing or stopping *diarrhœas* of old standing, or easing the pains of the intestines, Dr. Home found it useful; for the former purpose

pose he advises a decoction, two ounces to a quart, of which he gave a quart every day, four ounces every three hours.—*Woodville*. It is used with advantage as an injection in tenesmus, and is often applied externally to the piles.—*Clin. Exp.* The flowers have also been used medicinally, being supposed to possess anodyne and pectoral virtues; but it is probable that no part of the plant deserves much consideration as a medicine.—*Woodville*. The seeds of this plant are said to intoxicate or stupify fish so that they suffer themselves to be taken out of the water with the hand.—*Bergius*. In the pulmonary complaints of cattle, it has been found of great service, and is used for consumptive cows in Norway. The down serves for tinder. Horses, cows, sheep, goats, and swine refuse it.—*Withering*.

14. **DATURA.** *D. stramonium.* *Solanum fætidum.* *Tatula.* Aug. Thorn apple.

*Gen. Desc.* Bloss. funnel-shaped, plaited; cal. tubular, angular, falling off with the blossom; caps. four-valved.

*Spec. Desc.* Seed-vessel thorny, upright, egg-shaped. Leaves egg-shaped, smooth, deeply indented. Blossom large, white, sometimes purplish. A large wide-spreading plant, native of America, but naturalized. *Rubbish, dung-hills.* BLOSS. July.

*Use.* An ointment, prepared from the leaves, gives ease in external inflammations and *hemorrhoids*. The Edinburgh College directs an extract to be prepared by evaporating the expressed juice of the leaves. This has been given with advantage in cases of convulsions, epilepsies, mania, especially that succeeding child-birth.—*See Woodville*. Out of fourteen epileptic patients at Stockholm, eight were cured, and five relieved, by Dr. Ohelius; the dose two to sixteen grains a day. This plant has been long known as a powerful *narcotic poison*; numerous instances are recorded of its deleterious effects, especially the seeds; which being taken internally have produced madness, tremors, swelling, itching, inflammation.—*See Med. Com. i.* 368, *iii.* 22. *Woodville, &c.* All parts of the plant possess a narcotic power, but the seeds are the only part of whose fatal effects instances are recorded; their soporiferous and intoxicating qualities are well known in the East, and are said to have been frequently converted to the most licentious and dishonorable purposes.—*Haller, Lindenstolphe*. By holding this plant to the nose for some time, or sleeping in a bed where the leaves are strewed, giddiness and

stupor have been produced.—*Stork*. Externally the leaves of stramonium have been used as an application to inflammatory tumors and burns.—*Gerard*. Horses, cows, goats, and sheep refuse it.

15. *HYOSCYAMUS*. *H. niger*. *H. flavus*. *H. vulgaris*.  
*Ang.* Henbane. Black henbane.

*Gen. Desc.* Blossom funnel-shaped, blunt, irregular; stam. leaning; caps. with a lid, two-celled; seeds many, kidney-shaped.

*Spec. Desc.* *Leaves* embracing the stem, indented. *Flowers* sitting. *Blossom* tube white, middle deep purple, border pale yellowish brown, veined with purple; anthers and style deep purple. The whole plant woolly and clammy, with a strong peculiar odor. *Villages, road sides, rubbish.* *Bloss.* June.

*Use.* Henbane is a powerful narcotic poison, and many instances are recorded of its deleterious effects; from whence it appears, that any part of the plant taken in sufficient quantity is capable of producing the most alarming and terrible symptoms. See in *Phil. Trans.* vol. *xl.* p. 446, an account of the dreadful madness occasioned to nine persons from eating the root, attended with the remarkable circumstance that after their recovery for some days, all objects appeared bright red. See also for the effect of the seeds, *Phil. Trans.* vol. *xxxviii.* p. 99. And of the leaves boiled in broth,—*Ibid.* vol. *47.* A few seeds of the henbane have been known to deprive a man of his reason and the use of his limbs.—*Lightfoot*. Dr. Smith however says, that he has often eaten the seeds with impunity.—*Withering*. Haller relates the contrary of a companion of his.—*Stirp. Helv.* n. 580. It is probable that the powerful qualities of this plant may under proper management be used with good effect in medicine; it was well known to the ancients and esteemed as an anodyne, but was laid aside till Baron Stœrck published cases of different diseases, in which extract prepared from the juice was found to be an efficacious remedy; such as internal spasms and convulsions, palpitations of the heart, madness, melancholy, epilepsy, inveterate head-achs, hæmoptysis. It has been found to produce sleep more powerfully than opium; and as it possesses a laxative quality, may be useful where the astringency of opium renders the use of it liable to objection. This medicine has not always been found equally successful, (Greeding, Cullen, &c.) but experience proves it to be an useful anodyne.—*Woodville*.

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The leaves are said to have been applied with advantage externally, in the way of poultice, to resolve scirrhus tumors, and to remove some pains of the rheumatic and arthritic kind. The smell of the henbane is peculiar, and the bruised leaves emit an odor like that of tobacco; this is stronger if the leaves are burnt, and they sparkle with a deflagration resembling that of nitre, but to the taste they are mild and mucilaginous. It is poisonous to dogs and birds, but horses, cows, goats, and swine are not affected by it.—*Woodville*. Scattered about a house it is said to drive away mice. The Edinburgh College order the expressed juice to be evaporated to an extract, which may perhaps, in that state, be advantageously joined with opium, if costiveness is to be avoided; the dose is from half a scruple to half a drachm. Goats are not fond of it. Horses, cows, sheep, and swine refuse it, though sheep will sometimes eat it when young.—*Withering*.

16. ATROPA. *A. belladonna*. *Belladonna trichotoma*. *Solanum lethale*.

*Ang.* Deadly nightshade. Dway berries. Deadly dwale.

*Gen. Desc.* Blossom bell-shaped; stam. distant; berry globular, two-celled.

*Spec. Desc.* Stem herbaceous, zigzag, two or three feet high. *Leaves* egg-shaped, entire. *Bloss.* dark purple with a yellow base, and greenish red outside. *Berry* green, changing to red, and black when ripe. *Hedges, among lime-stone and rubbish.* *Bloss.* June, August.

*Use.* This plant has long been known as a strong narcotic poison, and though the berries are less powerful than the leaves, we have many instances of their fatal effects, especially upon children, who have been allured by their beautiful appearance and sweet taste; they are recorded by a great variety of authors; and this is supposed to be the plant alluded to by Shakspeare, who makes Banquo say,

“ Or have we eaten of the insane root,  
Which takes the reason prisoner?”

MACBETH.

For the dreadful symptoms produced, (vertigo, thirst, madness, convulsions, death,) see Dr. Woodville, l. c. Vinegar drank liberally has been found efficacious in obviating its effects, but evacuations should always be first promoted.—*Woodville*. The fresh leaves have been used externally with success to discuss tumors of the breasts of the scirrhus or even cancerous kind; and Dr. Graham says he found great benefit from a poultice made of the

roots boiled in milk and applied to hard ill-conditioned tumors and ulcers.—*Med. Comm. vol. i. p. 419.* Their good effects in this way at length induced physicians to employ them internally for the same disorders; but though they have often been found a serviceable and important remedy, their success has not always been equal. Dr. Cullen however adduces several instances of its efficacy in the cure of cancer and scirrhus. The sensible effects of the leaves, taken medicinally, are usually by the skin, the urinary passages, and sometimes by stool. Its operation is so uncertain that the proper dose can with difficulty be ascertained; six grains is a very large dose. Of the berries, successfully employed by Gesner, &c. as an anodyne in dysenteries, a small spoonful of a syrup of the juice was the dose given. The root has the same qualities, but less virulent.—*Woodville.* It appears from a Case related by Ray, that where the skin is broken, the external application of the fresh leaf is attended with considerable danger, —*Ray Hist. Plant. 680.* A large glass of warm vinegar taken immediately after eating the berries will prevent any bad effect.—*Lightfoot.* The juice of the ripe berries stains paper of a beautiful and durable purple.—*Withering.*

17. SOLANUM. *S. dulcamara. S. scandens glycy-picos. Amaradulcis.*

*Ang.* Woody nightshade. Bitter-sweet.

*Gen. Desc.* Bloss. wheel-shaped. Anthers a little united, two holes at the top of each. Berry two-celled.

*Spec. Desc.* Stems smooth, rather shrub-like, zigzag, twining. Leaves egg spear shaped, the upper l. sometimes halberd shaped. Flowers in tuft-like bunches, purple, with two green spots at the base of each segment; sometimes flesh colour, rarely white. Berries two-celled, scarlet. Moist brakes, hedges, sides of ditches. Bloss. June, July.

*Use.* The roots and stalks, upon being chewed, first cause a sensation of bitterness, which is soon followed by a considerable degree of sweetness; hence the name of bitter-sweet. The berries have not yet been applied to the purposes of medicine, but they seem to act powerfully upon the primæ viæ, in exciting violent vomiting and purging; thirty were given to a dog, which soon became mad, and died in three hours, when, on his being opened, the berries were found in his stomach unchanged by digestion. The *stipites* or young twigs, are directed for use in the Edinburgh Pharm. either fresh or dried, allowance being made for the diminution of its powers in drying; they should be gathered in Autumn. The *Dulcamara*, though  
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it does not possess the narcotic qualities of other nightshades, is however admitted to be a medicine of considerable efficacy. Murray says that it promotes *all the secretions*, in which Bergius seems to coincide.—*Mat. Med.* 131. Haller observes, that it partakes of the milder powers of the nightshade joined to a resolvent and saponaceous quality. It has been recommended in diseases extremely various; Bergius confines it to *rheumatismus, et retentio mensium et lochiorum*. From the experiments of Razoux and others, it appears to have been used with advantage in some obstinate cutaneous eruptions.—*Woodville*. It is said by Boerhaave to be a medicine far superior to china and sarsaparilla as a sweetner and restorative. Linnæus says, an infusion of the young twigs is an admirable medicine in *acute rheumatisms, inflammations, fevers, and suppression of the lochia*. In *asthma* it was found very efficacious by Dr. Hill; and Dr. Hallenberg has advised it in *ischiatric and rheumatic pains, jaundice, scurvy, and lues venerea*. He (Linnæus also) directs a pint of boiling water to be poured upon two drachms of the stalks sliced and dried; after standing half an hour it must be boiled fifteen minutes; the dose is two tea cups full or more, morning and evening. The stalks may be gathered early in spring, but better in autumn, as the sensible qualities are then strongest.—*Med. Comm.* The root has the smell of the potatoe.—*Dr. Beddoes*: Sheep and goats eat it; horses, cows, and swine refuse it.

18. SOLANUM. *S. nigrum*.

*Ang.* Common nightshade. Garden nightshade.

*Gen. Desc.* As above.

*Spec. Desc.* Stem without prickles, herbaceous, branched, angular. Leaves egg-shaped, toothed, angular. Bunches nodding, pointing two ways. Fruit-stalks lateral, midway between the leaves. Blossom white. Berries black. This plant is subject to great varieties; with us it is herbaceous, in southern countries woody and very hard. Rubbish, dunghills, kitchen gardens.

*Use.* The leaves infused in boiling water, and taken at bed time, from one to three grains, occasion a copious perspiration, increase the secretion by the kidneys, and generally purge more or less the following day. These properties render it capable of doing essential service in various diseases, if judiciously applied, as may be seen in *Mr. Gattaker's Observations on the internal Use of Solanum*. But its effects on the nervous system are so considerable, and yet so uncertain, that it must ever be administered

with the greatest caution. The leaves applied externally, abate inflammation and assuage pain.—*Withering*. This plant is faint and disagreeable to the smell, and possesses the deleterious qualities of the other nightshades in a very considerable degree, even its odor being so powerfully *narcotic* as to cause sleep. The berries are equally poisonous with the leaves, (*Wepfer De Cicut. p. 226*) and to poultry they are immediately fatal.—*Haller*. The leaves boiled, and eaten by a mother and four children, produced swellings of the face and limbs, followed by inflammation and gangrene, but the husband, who ate of it at the same time, found no consequent disorder. (*Rucker. Commerc. Noric. 1731, p. 372*). It is asserted by Mr. Bromfield, that in a dose of one grain it had a mortal effect upon one of his patients. It is however mentioned by Dioscorides, &c. as an esculent plant; and Guerin (*de Veget. ven. Alsatia, p. 66*) relates that he drank an infusion of fifteen grains without suffering; and that an epileptic patient took from half a drachm to two drachms of the expressed juice, without perceiving any narcotic symptom to follow; and a still larger dose, together with two drachms of the juice of the berries, being given to some soldiers, no other effect was produced than that of an increased quantity of urine. (*Murray, l. c.*) Externally it has been found useful as a *discutient* and *anodyne*, in various affections of the skin, tumefactions of the glands, ulcers, and disorders of the eyes; with the Arabians it is a common application to *burns* and *ulcers*; and Ray speaks highly of its effects in *indurations of the breast*. Mr. Gattaker has recommended, in a publication on the subject, its internal use in *old sores*, *scrophulous* and *cancerous ulcers*, *cutaneous eruptions*, and even in *dropsies*; one grain of the dried leaves; he says, infused in one ounce of water, sometimes produced considerable effect; in a dose of two or three grains it seldom failed to evacuate the first passages, or to increase sensibly the discharge by the skin or by the kidneys; and not unfrequently it occasioned head-ach, giddiness, dimness, and drowsiness.—*See Gat.* Mr. Bromfield however soon after declared, (see his *Account of English Nightshades*) that the cases in which he tried it, were much aggravated by it; and that its use is prejudicial and dangerous; Mr. G. renewed his assertion in *Essays on Medical Subjects*, in 1764, (*see Introduction and p. 38*)—*Woodville*. The flowers smell like musk. Horses, cows, sheep, goats, and swine refuse it.—*Withering*.

(To be continued.)

## LETTER II.

## OF QUACKS AND EMPIRICISM.

## CHARACTER I. Dr. DAY.

**F**ROM some fortuitous circumstance, or temporary bias, an ample fortune has been raised by a single nostrum only; and Schomberg's pill, which the late Dr. James procured from a poor German,\* and sold under the denomination of James's powder, affords a proof, which the success of a water doctor has fully confirmed. If one specific shall become so productive, it might be concluded that by multiplying the number the product would be proportionally augmented; but to ensure success, it would require an extent of abilities, rarely found in an Empiric: It would be necessary to assume and support different characters, in order to maintain and extend the reputation of each respective specific; but to this versatile exertion Dr. Day proved adequate. He was born in Holland, though of German parents, of the name of Dies, which the Doctor has translated into the English synonymism of Day, under which name he first made his appearance in London about 1775, when he kept an elegant equipage with two footmen in green livery; his dress was showy, with brilliant shoe and knee buckles, white silk stockings, and elegantly wrought clothes.

As it was impracticable for Dr. Day, however Proteus-like the various characters he assumed, to appear in each respectively at the same time, he kept Agents, little inferior to himself in artful delusion; Dr. Rock, Dr. Christie, &c. by whom, rendezvous were appointed for the reception of the credulous. Dr. Day himself then lived in Sherard Street, Golden Square; but at the period I allude to, the name of Rock, who had previously resided with Mayersbach, was upon the door; at the same time he kept a quack warehouse at No. 3, James Street, Covent Garden; Dr. Christie was the bill sticker. Dr. Lantware was another agent, who was appointed to father his famous bill to promote abortion, marked No. 5; but if this did not succeed,

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\* This occasioned a dispute between him and Dr. James; but the latter was a more expert writer. The former introduced one of his appeals in the public prints with this motto.

“ Let Dr. James say what he will,  
James's powder is Schomberg's pill.”

succeed, a reference was given to the deluded females to consult a lady, who procured accommodations for privately lying-in, as appears by the bill, No. 6.

The originals are in my possession, but I think them so curious and valuable as to merit a place in your Journal.

“ To the PUBLIC. (No. 1.)

“ The famous *Sympathetic Powders*, which have done so many surprizing cures when all other remedies have failed. As they never can hurt the patient, and are so innocent that young children have been cured by them, the patient has no need of internal medicines, to overload and nauseate the stomach, or hurt the constitution. Every sort of distemper or disease whatsoever, may or will be cured by bringing or sending their morning's urine to the Doctor's house, in Sherrard Street, Golden Square, the third door from Shug Lane, No. 3 over the door, facing a perfumer's.

“ The doctor is to be spoke with from nine till two every day, (Sundays excepted). He is also possessed of the most authentic testimonies of the many cures he has performed in the worst disorders. N. B. He cures fits and cancers without fail. Advice to the poor gratis.”

“ To the PUBLIC. (No. 2.)

“ Lately discovered, a new and easy method of curing old standing coughs, consumptions, all disorders of the lungs, asthmatic hooping coughs, tertian and quartan agues, scorbutic and all sorts of eruptions of the skin, cancers, piles, rheumatism, and some other private diseases. Those who are afflicted with any of the aforesaid disorders, may and will be cured by bringing or sending their morning's urine to the Doctor's in Greek Street, Soho, the third door from Compton Street, No. 3 over the door, facing the George. By the doctor's new method, they will relieve in a few days, according to the disorder. He may be spoke with from ten till two every day (Sundays excepted). The doctor is possessed of the most authentic testimonies of the cures he has performed in the most inveterate disorders, and also those that were declared incurable by other gentlemen of the faculty. The Poor advice for nothing.

“ N. B. He also cures all disorders of the eyes without fail.”

(No. 3.)

“ DOCTER CHRISTIE acquaints the public, that he continues disposing of, at the Physical and Mineral Warehouse, in Church Street, St. Ann's, Soho, the second house from

from Greek Street, next the Coach and Horses ale-house, and no where else, his anti-venereal treacle, well-known for curing the venereal disease, rheumatism, scurvy, old-standing sores, and breaking out of the skin, at three shillings per bottle, which, by many years experience, has never failed in curing the above mentioned disorders, without hindrance of business, or the knowledge of a bed-fellow; as it works off by urine, it is beyond a doubt superior to any medicine ever invented, in its certainty of performing a safe and easy cure. It is a convenient medicine for Seamen, Travellers, and Servants in places. Those unfortunate people of either sex, who have fallen into the hands of unskilful mechanics, who by getting a medicine call themselves doctors, and give out thousands of puffing bills, and practise on the unhappy people to sell their pernicious drugs, to get money, by keeping them months under a course of physic; let none of those of either sex despair of being cured, though the disease be of long standing.

“ Advice gratis — No cure no pay — Genteel people of either sex may lodge and board in the doctor’s house.”

(No. 4.)

Is by Doctor Christie, and not greatly different from No. 3, but does not offer bed and board for both sexes.

“ TO THE LADIES. (No. 5.)

“ The female mixture, which removes all sorts of obstructions in certain cases of ever so old a date, with sore and swelled legs, shortness of breath, giddiness, and all the symptoms which attend a change of life, with ease safety, and certainty.

“ *A caution to pregnant women.* As pregnancy is often mistaken for obstructions, whoever has reason to suspect herself with child, must not use this powerful mixture, as it will certainly bring on a miscarriage.

“ It is sold at the Physical and Mineral Warehouse, in Church Street, St. Ann’s Soho, the second house from Greek Street, next door to the Coach and Horses ale-house, and no where else, at half a guinea, and a guinea a bottle, with proper directions how to use it.”

(No. 6.)

Is advertised “ A Gentlewoman,” who sells a mixture for 3 shillings a bottle to remove weaknesses, and concludes thus. “ TO THE LADIES.

“ N. B. Pregnant women may be accommodated according to their abilities, where privacy is required. No. 3 James Street, Covent garden,”

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One might have imagined, that in a well regulated city, the magistrates would not have suffered the quack bill, No. 5, to have been circulated with impunity; as infanticide has been amenable to law in every civilized nation. Whoever contemplates the Institution of the Royal College of Physicians, would have concluded that its salutary interference would have been laudably exerted upon such a gross insult to virtue, and open violation of law; but fortunately for Dr. Day, he was not a licentiate, but merely a German adventurer; and it has been principally against the former, that its vengeance has been exercised.

It ought, however, to be recorded, in extenuation of Dr. Day, that his medicine to promote abortion, was an harmless deception, although it was found that the demand for it was so great, as to have enabled him to pocket as much as ten guines a day; till the deluded females found it inactive, and consequently not injurious to their health; and perhaps, by adopting this means of deluding them, he saved them from attempting some really dangerous expedient; for I believe that Dr. Day, as it has been observed, never administered any pernicious means for the purpose of inducing abortion, however censurable he might have been, in imposing upon the weakness of the public; he was naturally good tempered, and facetious, which led him to laugh at, rather than correct, their credulity; and he might certainly be considered as very officious and gallant, in gratifying the wishes of the female sex, in not only offering them a bed as well as the other sex, but likewise a remedy, to rid them of an unwelcome burthen; and in case of its failure, affording them private apartments for their easy accommodation. It was, hence, doubly his interest, to prevent infanticide; for in addition to his abortive mixture, he had the profits of an accoucheur, and the hire of chambers suitably to the rank and finances of the victim of double deception, to avail himself of.

I have not seen the doctor for some years past, but I am informed that he resides at the house from whence one of his quack bills is dated, and that he claims the respect of many of his neighbours, as a private individual which induces me to think that he merits a place in your Journal, prior to Dr. Griffenbergh and Dr. Mayersbach, who will be introduced in the next letter of

Your Constant Reader,

*London, June 30, 1804.*

IETROS,



To Dr. BRADLEY.

SIR,

IT must give every lover of his profession sincere pleasure to find, that those diseases once called the *opprobria medicorum* are now boldly and candidly investigated. If we are still undecided as to remedies, we may at least not be afraid to enquire after laws; and when these are established, we have rational grounds to proceed on.

Since the days of Sydenham, physicians seem to have been afraid of Gout. Some unfortunate events which followed what were considered as cures, very much increased the apprehension of interfering with that formidable enemy. The utmost that has been usually ventured on was to protect the stomach. Dr. Cadogan indeed exhibited a bolder kind of practice; but his treatment was for the most part so indiscriminate, his promises to his converts so unguarded, that his theory soon fell into discredit.

As soon after my arrival at Madeira as I could avail myself of that leisure which a new situation afforded me, a fit of the gout induced me to examine my papers on that subject, and to recollect all I had observed of the disease. And here I can bear testimony to Mr. Wadd's claim to the use of cold water at least ten years ago, and to that of his late father in law, Dr. Waymann, near twenty years before him. When all my materials were prepared and almost arranged for the press, I found the disadvantage of living so far from the intercourse of men engaged in experimental enquiries. The analyses made of gouty calculi was in direct opposition to one part of my theory, and of course determined me to lay aside my work. It however gives me much satisfaction to find, that the practice in that disease is becoming every day more bold; and that even so illustrious a character as Heberden has sanctioned bleeding in acute gout. Those who peruse Sydenham with care, will find he is by no means chargeable with the practice which so generally obtained after his time. On the contrary, there are cases in which he advises bleeding; and it was his constant custom occasionally to purge himself.

These remarks are intended only to introduce a work, which, as far as I know, has not hitherto appeared in England. It is the production of one who holds the important office of *Archiatros of Portugal*, and containing some valuable facts which he witnessed on himself as well as others,

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is particularly entitled to notice. The work is written in Portuguese and Latin. The former, a language little cultivated by the profession; and as the liberality of the times, and the miscellaneous contents of your Journal, encourage the diffusion of knowledge, the following translation from the two languages may not be inconsistent with your plan.

*“Observations on the safe and efficacious Use of Peruvian Bark for the Cure of Gout, by FRANCISCO TAVARES, First Physician of the Kingdom of Portugal, &c. &c.*

That celebrated investigator of the nature of diseases, Sydenham, long since suspected that the Peruvian bark, whose virtues exceeded most other then known articles in the *Materia Medica*, might hereafter be found useful in gout, which had hitherto withstood the force of so many remedies. Boerhaave, and his illustrious commentator, seemed to assent to this opinion; but without adding any thing of their own, contented themselves with a respectful reference to the English Hippocrates. Though the celebrated Held, in the *Ephemerides of Natural Curiosities*, left several important facts concerning the safe use of this remedy in gout, yet unfortunately they stand unsupported by any other authority; on this account, Murray not having prosecuted the enquiry experimentally, dismisses the article with a few words on the virtues of bark in the gout.\* Perhaps cautious physicians, dreading the fatal effects of the imprudent use of bitter remedies, which have been handed down to us from the ancients, were fearful of trying bark, and willing to leave the subject untouched.

It has been the fate of the most valuable remedies to be most opposed. Sometimes the ignorance of physicians, and their want of diligence in attending to the exhibition of these medicines, or their impatience in being disappointed in their first and perhaps ill-directed experiments, have been the cause of this opposition. I am prepared to expect the same opposition to the use of bark in the gout, though for more than eight years I have experienced the advantage of it in my own person, and have confirmed this experience by general practice.

On this occasion I feel it a duty to express publicly my acknowledgments to Sen. Bento Joachim de Lemos, once my pupil, but now Professor of Medicine in the University of Coimbra. Urged by our ancient friendship, he communicated

municated to me his observations, the source of which will soon be related, and entreated me by repeated letters to make use of bark, to lessen the violent and frequent attacks of a disease which had tormented me for sixteen years.

I confess that for some time I neglected the advice and wishes of my friend, nor shall I conceal that I was fearful of the practice, recollecting the cautions of Galen, Celsus, Aurelianus, Gaubius, Van Swieten, Cullen, and others, against bitter remedies in the gout. Thus divided on one side by terror, on the other by the well known abilities of the Professor, and my confidence in his probity and friendship, I willingly reflected that the bark was not only free from the bitterness of the once celebrated Portland powder, but that it was also serviceable in some diseases which have a strong analogy with gout, and that it even possessed properties which promised relief to that complaint. From revolving all these circumstances, I flattered myself, that without a perfect cure, I might at least lessen the violence and frequency of the paroxysms, advantages which my fellow-sufferers only can justly appreciate.

Under this persuasion, which has been confirmed by experience, I have spared no pains to establish the usefulness of the remedy by every authority I could collect; I shall therefore first relate the observations of my friend, explain with candour what I have experienced in my own case, and, lastly, since, to use the words of Celsus, the facts have not been discovered after, but have led to the theory, I have thought it right to add the reasons for this agreement, the necessity of the practice, and an account of such remedies as have probably assisted the use of the bark.

CASE I. giving an account of the circumstances which led to the discovery.

Professor de Lemos being called to visit a Cistercian monk in the gout, was requested either to cure him or to cut off his legs. To this my friend briefly replied, that it was as difficult to do one as it was easy to do the other, and that he could prescribe nothing but time, patience, and diet, with a very few remedies to be cautiously exhibited during the paroxysm. The village surgeon, scarcely deserving the name of a barber, was present, and had promised to cure the patient. He smiled at the prudence of the Professor, and again renewed his promise. Dr. Lemos took leave of his patient, and was soon afterwards consulted

sulted concerning a purge, which the barber had prescribed for their patient. This consisted of half a drachm of resin of jalap, the same quantity of scammony mixed with half an ounce of diacodium, for a single dose. The Professor with difficulty suppressing laughter, astonishment, rage, and impatience, at length sufficiently composed himself to reply, that a fourth part of such a dose would be a dangerous remedy. What quantity the monk took, never was ascertained; but after the purge a drachm of powdered bark was exhibited every hour, so that in the night and day, two ounces were taken. Dr. de Lemos renewed his visit, expecting to find the monk in a worse state than before; but what was his astonishment to find him walking on crutches, and two days after quitting his house. This fact suggested to him the exhibition of a purge consisting of  $\frac{5}{8}$  or  $\frac{3}{4}$  of Epsom salt, giving in the mean time the bark in the above quantity and doses. Of the monk he never after could gain any intelligence.

CASE II. The Rev. F. I. de T. director of the apothecary's shop at the royal hospital of Coimbro, about forty-six years old, fat and sedentary, having in the year 1796 suffered for ten days the first gouty paroxysm in his great toe, felt a repetition of the disease about three months afterwards. Prof. Lemos was consulted on the third day, and prescribed the purging salt and Peruvian bark in the manner above related. The pain was so much lessened, that on the following day the patient left his bed, and on the immediately succeeding day walked without difficulty. About a year after he had a fresh attack, and derived the same benefit from the same remedies. He continued free from the complaint for two years. As soon as the first symptoms of the paroxysm appeared, he took his purge, and afterwards only 3 drachms of powdered bark. From these, if he did not derive the desired effect, he at least found that his pains were not increased, and on the following day they yielded to 6 more drachms of bark. Hence it is evident, that to produce the desired effect, a large quantity of bark is necessary. From that time (1799) to 1802, he has felt no return, except that recovering from a fever he found a pain and swelling in his knee, which the bark relieved.

CASE III. I. A. fat and sedentary from his occupation, from 45 to 50 years of age, was for many years gouty, the paroxysms continuing never less than twelve or fourteen days, and sometimes longer. Being treated according

ing to the above plan, in the three last paroxysms, though his stomach would not bear such repeated doses of bark, yet he always obtained relief from his pains, nor did any one of these fits detain him longer than four days in the house. Though he was accustomed to suffer two attacks in the year, yet since the use of the bark he has been visited in the space of eight years with only the three above mentioned. This winter (1802) he has suffered much by the catarrhal disposition of the season, but has been free from gout.

Professor Lemos has many other cases, of which he kept no memoranda. I shall subjoin those under my own observation.

CASE IV. I. da C. a shoe-maker, having gone through his first gouty paroxysm in his great toe, three weeks afterwards was attacked in the hand. He took the bitter salt and bark in the manner described, and the pain ceased within twenty-four hours. By my advice he discontinued the use of the bark. One month afterwards, feeling a troublesome sensation in his foot, he returned to the remedy, and after the third dose the uneasy sensation ceased, the motion was free, and his health restored.

CASE V. The author's own. At the age of 33 years, being advanced to the rank of public Professor in ordinary in the University of Coimbra, the close application and confinement such an office required, soon brought into action that hereditary disposition to gout which I had derived from my father, and which I had probably hitherto only prevented by muscular exercise. After a severe rheumatism, I suffered for the first time (1786) acute gout in my instep; this continued about fifteen days, after which I remained well for a twelvemonth. In the following spring, however, the paroxysm returned, and two years afterwards, with the same regularity. After this last paroxysm I was teased with want of appetite, and sometimes vomitings, which I attributed to indigestion, being accustomed to lecture every evening soon after dinner. For this complaint I repaired to the Caldas, drank the waters, and remained two years free of gout. At the close of 1790 the gout returned, and again in the following spring. In the succeeding year, 1792, the fit occurred in an advanced state of the summer; it was preceded by a bilious fever, and continued a month. Though at this time, by orders from the Superior of the University, I had changed my plan of life from sedentary science to active employment,

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yet at the end of two years the gout returned with as regular a paroxysm as before.

Hitherto, my feet only had suffered; but in the year 1797, for the first time, the disease passed from my feet to my knee, and from that time I do not recollect a single paroxysm, which after three or four days did not take the same course. Nor were the attacks as before, confined to once in a year: but by the recurrence of a second attack the parts were during the intermediate space painful, and unfit for their necessary functions. I now became dispirited; and although my diet was strictly regular, yet frequent indigestions occurred whenever I omitted muscular exercise, either from the duties of my office or merely from melancholy. I had suffered the longest paroxysm of all in the year 1800; and at length, on the 11th of September, 1801, having slightly strained my left foot, it became the seat of gout; afterwards my right foot, and alternately my knees and feet, for three months. On the decline of the paroxysm, weary of so much suffering, I took a solution of resin of guaiacum in gum arabic, syrup, and cinnamon water, from which I derived relief sooner than in my former paroxysms. The effects of this remedy were a gentle perspiration during the night, and one or two bilious stools in the day: and though I did not acquire the perfect use of my limbs, I could walk with a crutch.

On the 28th of October, from a very slight cause, my feet were attacked, and my knees were more painful than at any former period. On this occasion I had reason to believe that the solution of guaiacum shortened the period, for in the space of four weeks I found myself restored. At the end of that time, without any previous notice, the joint of my right toe became painful but very slightly, my knee began to be affected in the same way, and my leg to swell. The weather was intensely cold and damp, the wind blowing furiously, and varying from north to south. There was also an epidemic catarrh, the effects of which I felt with pain in the head. At length, on December 27, at two o'clock in the morning, commenced an acute pain in my foot, and my knee was relieved.

It was now that the recollection of my recent severe sufferings reminded me of the advice of my friend. I began the bark, and in thirty-six hours took 18 drachms of the powder; no inconvenience in my stomach followed; no increase of pain, no incapacity to move, though my foot was firm on the ground; no sensation of weight in my leg, nor any of that inquietude or impatience peculiar to gouty subjects.

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On the 29th of December, by the assistance of a crutch I could fulfil my necessary duties, moving indeed slowly but without perceiving any weight in my foot, or swelling of my leg. I laid aside the bark for two days, and after this I took fourteen drachms, and in eight days swallowed four ounces, remaining only two days at home. Aware that the bark in large doses usually purged me, I omitted the previous dose of Epsom salt. In this I was not mistaken, for after the third dose of bark, followed three copious bilious evacuations. For this reason, within the twenty-four hours I took ten drachms. I now laid aside the bark for four days more, and afterwards took two drachms each day, or sometimes, instead of the powder, took a mixture of bark and wine, varying the form, that the remedy might not lose its effect. For some time a slight pain continued, for which the cold and wet weather were sufficient to account; however, I never failed to go abroad morning and evening; and excepting the uneasiness that attended first leaving my bed, could accomplish the whole with little or no difficulty. But this pain, however slight, continued even to the month of February (1802) which induced me to repent of my obstinacy in not purging myself freely at the beginning of the paroxysm; I therefore took 20 grains of jalap and 8 of calomel. After this the pain almost entirely ceased, nothing remaining but some degree of debility, which I attributed to the frequent repetition of paroxysms and the want of exercise in the open air, which the inclemency of the season prevented.

From the 22d and 24th of February, being clear days, with a heat equal to that of Summer, I took the exercise of riding. The following days were cold and cloudy with a north-east wind, which I have reason to remember, for without any other cause to which I could ascribe it, I was attacked by a fresh pain in my great toe at two o'clock in the morning. I have no doubt that it would have increased, if I had not instantly had recourse to what I now considered a sheet anchor. Scarcely had I taken the third drachm of bark when the pain became milder, though I had prepared myself to expect a violent paroxysm, having already found the veins of my foot and leg tumid, an erysipelatous efflorescence, swelling, spasmodic contractions of the muscles of the leg, and cramp in the foot, accompanied with the usual impatience and inquietude, fever, shiverings, and all these exasperated by a fifth attack of the catarrh before mentioned. The pain was so much relieved that I could rest on my foot and walk out, nor did

any other of the symptoms remain. On the following days, though very cold, I continued to go out, halt indeed in my first steps; but after a few minutes the very act of walking almost fitted me for it. On the first day I took a drachm of bark every hour till I had consumed an ounce; after this, passed the night well, sleeping soundly, my foot being so easy that no inconvenience was felt excepting from some awkwardness in its position. On the following days I took another ounce of bark, and afterwards desisted. I recovered my health in the beginning of March, excepting only a trifling swelling; and so sensibly am I impressed with the value of this remedy that, or the future, I shall never fail to have recourse to it, or to recommend it to others.

CASE VI. Whilst preparing these sheets, I communicated the importance of bark in gouty cases to my worthy friend, Senr. Norberto Antonio Chalbert, Surgeon to the Royal Camera, a man of well known reputation, and of no common erudition or prudence. A few days after he was sent for by an old gouty subject in an acute paroxysm. This patient had frequently been under Senr. Chalbert's care, and no former remedies he could suggest ever lessened the fit, so as to reduce the period within the space of a month. He prescribed however a purge on this occasion, and in the afternoon began with the bark in the manner above described, continuing it for the two following days till two ounces were consumed. On the third day the patient thought himself well enough to leave his house, without any considerable uneasiness.

CASE VII. F. Z. formerly a dancing master, fifty years of age, has been afflicted with gout from the age of twenty-five. For this reason his mode of life is sedentary; he is lean and full of vivacity, yet has usually two paroxysms in a year, which continue for three months or longer. In the beginning of January 1802, he had a paroxysm which lasted till March, and on the 18th of that month the disease attacked his feet with more violence than before, passed to the elbow, and thence to the right hand; again to the feet, the ankle, the heel, the *tendo* Achillis, and the thumb. On the 6th of April I visited him, and found the foot swoln near the joint with an efflorescence, and painful when pressed upon: the right hand had not yet recovered its size or free motion. I ordered an ounce of Epsom salt, from which he had an easy and copious evacuation. On the same evening I advised him to take half an ounce



ounce of bark before midnight, as he assured me his stomach was equal to it: however, after the third drachm, he felt some repugnance. But with the quantity taken he slept soundly, contrary to his usual custom, and was free from pain. In the morning the motion of his feet was more free, and his hand in such a state as enabled him to write me a letter, describing his situation. After taking three drachms more on the same morning, his stomach became uneasy, and he vomited a small portion of the last dose. I proposed longer intervals between the doses. He took a drachm four times a-day, and though I could not promise him such speedy relief, I trusted that the efficacy of the remedy would not be interrupted by the too great sensibility of his stomach. Though he had not taken quite two ounces of bark, yet on the following day he was so far relieved from pain, swelling, redness, and difficult motion, that he could walk like a person in health, and take his exercise abroad. For the perfect establishment of his health I advised a cold infusion of bark for a few days; this his stomach bore without inconvenience.

CASE VIII. Having bruised my knee near the patella I began to feel threatening of gout, the pain gradually increasing over the whole articulation. Having applied three leeches to the bruised part, I took half an ounce of bark, and in twenty-four hours found myself perfectly well.

I omit several other cases; those already related are sufficient to encourage any one who wishes to make trial of this remedy.

By what has been said, it is evident that the advantages of the proposed method consists in cleansing the primæ viæ by a powerful cathartic, as soon as the pain commences, and afterwards in exhibiting the bark in the dose of a drachm from hour to hour. For the two first days an ounce should be taken daily; on the four following, half an ounce each, increasing or lessening these quantities according to the judgment of a prudent physician.—Whether the bark is given in powder (which is always desirable) or in infusion or decoction, the quantity given must depend on the patient's stomach and other circumstances.

### *The Author's Reflections.*

Whatever is worth the attention of the physician in his observations on gout, as to its nature, the progress of its paroxysms, or variety of symptoms, and also whatever has

been observed of the bark, all contribute to recommend the latter above all other remedies hitherto proposed in the cure of this disease. Let us view these propositions in order.

As to the nature of gout, all authors agree that debility of the viscera, hereditary or acquired, producing indigestions, incomplete assimilations, and various complaints arising from the same causes, and showing themselves under a variety of forms, at length terminate in gout. It is evident, that all those causes (of which no physician is ignorant, and which it is unnecessary here to enlarge upon) which may produce or excite this debility in a subject predisposed thereto; in short, whatever may injure the nervous energy, and induce disease arising therefrom, may likewise excite gout. Hence, according to the variety of subjects and external circumstances, the disease appears under its regular paroxysms, anomalous, atonic, misplaced, retrograde, earlier or later, at greater or less intervals, changing its form, whilst its nature continues the same.

The ancient physicians always kept in view, that in curing the gout, the strength of the viscera should be restored: all recommended during the interval of the paroxysms, tonic, bitter, and gently stimulating remedies, even so far as to propose proper condiments to be taken with the food, in order to assist digestion. Whatever may be handed down to us from Celsus, Aurelianus, Aëtius, Aretæus, Galen, and others, as servicable in this complaint, are bitter remedies, administered with due caution, with the view to strengthening the stomach and intestines, and by that means procuring a more perfect assimilation of the food, and a regular secretion, excretion, and distribution of the juices, by which the strength of the solids being increased with every assistance from diet, a firm state of health might be established. Nor has the opinions of the moderns greatly differed; all have proposed medicines with a view to the same indications. All indeed have selected such remedies as they conceived best calculated for such purposes; but none of the modern writers that I am acquainted with, since the discovery of the Peruvian bark, speak of its virtues in the cure of gout, given in the manner here proposed. Sydenham, who was the first that advised the use of it, gave it in the quantity of a few grains daily. To pass over others, I recollect that Cullen, after condemning the use of other bitters in this disease, recommended the Peruvian bark with the same intention as Sydenham, merely as stomachic and strengthening, in the same

same way as he proposed steel. Gotf. Held was the only person who, as early as 1714, considered bark as a specific against the gout. Not satisfied with the small doses proposed by Sydenham, he used it in somewhat larger quantities. After objecting to Sydenham's small doses, he adds, "*Ego vero hactenus in praxi mea hunc corticem non granis sed plerumque ad scrupulum unum, vel drachmam dimidiam ordinavi, et illum quidem preservativè semel, vel bis in hebdomada; curative vero, malo jam appropinquante, mane et circa noctem assumere jussi; et sine topicis, tumor et dolores brevi remiserunt; febris in paroxysmo cum calore presens mitigata, et appetitus ciborum alias imminutus, vel plane abolitus resuscitatus, vel integre servatus, imo paroxysmus omnis brevi sublatus. Cortex enim noster ob blandum saporem amarum, fermentum gastricum vitiosum idque vel acre biliosum, aut viscidius acidum immutat; simulque, quod magnum in podagra beneficium, alvum apertam servat; sanguini quoque vigorem conciliat, ejusque acrimoniam corrigit; ac fibras tendinosas nerveas roborat, et solatur, sicque spasmodicas surarum, et aliarum partium contractiones et antevertit et abigit: anodyna etiam virtute pollens et blandum somnum inducit et dolores demulcet, nec minus cardiacum est, et collapsas vires restaurat. Uno verbo, Cortex Peruvianus in podagra divinum est remedium, quod multijuga experientia edoctus certò et firmissimè asseverare non nequeo.*" (Ephem. N. C. Centur. 3 & 4, Obs. 170, pag. 384.) It is much to be regretted, that this high road, so accessible to the most common observer, should, with many other equally valuable things, have become almost obliterated from the memory of man. The foundations of the healing art must be constructed not of visionary systems and theories, but of observations properly instituted, carefully repeated, and firmly established.

But though we should not be able to ascertain by authority the safety of giving bark in the gout, I trust those analogies which I shall now explain, will be sufficient to satisfy the attentive observer. If we once establish the use of bark in other similar diseases, we shall cease to wonder at its usefulness in this. Every attentive practitioner, and still more, every unhappy sufferer, will bear witness that the gout preserves regular periods in its paroxysms, not only respecting the season but the hour of invasion and remission; hence appears a ready analogy between this disease and the intermittent fever. Every one knows that the close of January, or the beginning of February, as

well as the advanced state of autumn, are seasons most dreaded by the gouty, as well as those in which we are to expect intermittents. It is also well known, that the autumnal paroxysms of each disease are the most obstinate, and that without the greatest caution, there is also most danger of a misplaced gout.

The gout, in its first attack, arrives at its most painful stage between two and three o'clock in the morning; on the following and succeeding days, the paroxysm returns about the same hour, going off with perspiration of the inflamed joint, or of the whole body. Oftentimes it imitates the exacerbations of the single or double tertians; and after the morning paroxysm another will regularly follow about four in the afternoon. In almost all my gouty attacks I have suffered this second or evening paroxysm with so much regularity, that I have constantly expected an increase of pain at seven in the evening, which should last till ten. Since the use of the bark this second paroxysm has never occurred.

It can hardly be disputed that the gout terminates after a certain period and number of paroxysms, varying according to circumstances; and also that, like the intermittent fever, every one of these fits finishes with a perspiration, having a sour smell, with turbid or bilious urine with a white lateritious sediment. It is also right to remark, as it may serve to strengthen the analogy, that gouty people are rarely if ever afflicted with ague; at least, among the numberless subjects of my acquaintance, I do not recollect one who caught the ague even when epidemic. Still further, the inhabitants of low and damp situations are more subject to gout than those who, in more elevated spots, enjoy a dry, clear, and better ventilated atmosphere. In the same manner as intermittents, gout follows the changes of season and vicissitudes of temperature; nay, it often precedes and foretells them, so that when cold, dampness, or a cloudiness are present, or approaching, not only is the present paroxysm exasperated and prolonged, but gouty subjects at that time free from the complaint, will be sensible of wandering arthritic pains, and other inconveniences; not uncommonly, these will prove the immediate cause of a fresh attack. Stoll, among the anomalies of the gouty fever, mentions *vagam intermittentem*, *vagam remittentem*, *veram obscuram tamen ac veluti inchoatam intermittertem*, quæ instituto paroxysmo cessat; and lastly, (after establishing the analogy in their attack and termination, between the bilious fever and gout) he considers it among the

the properties of gouty matter, that frequently an intermittent coming on a well treated gout, will prove its cure; in the same manner that an ill treated bilious or remittent fever will terminate in gout. It should also be remarked, that the celebrated Storck, in his *Diss. de Pleuritide*, suspecting this analogy between a truly inflammatory disease and the intermittent fever, proposed not long since treating pleurisy with extract of bark. In the acute rheumatism, a disease very similar to gout, Dr. Saunders exhibited with advantage, after the seventh day from the beginning of the disease, bark in conjunction with anti-phlogistic remedies, (*Observations on Red Bark*) probably induced by a similitude between that disease and the double tertian; nor does Cullen object to this practice, (*Elements of the Practice of Physic*, §. 469.) Considering then that the commencement and progress of gout is very similar to those of the intermittent fever, we may fairly infer that the bark will be useful in lessening the violence of the paroxysm in one as we find it actually does in the other.

The best authors advise in the worst species of intermittents, even attended with inflammatory symptoms, to give the bark rather too early than omit it too long; and if ever it disappoints them, they impute it to a too sparing exhibition of, or to the bad properties in, the remedy, finding by experience that no danger attends the giving a larger quantity. Nor is it possible to cure the worst species of intermittents, unless a large quantity is given as well in the interval of remission or intermission as during the paroxysm itself. To give the authority of innumerable writers on a fact so well established, could answer no other purpose than to show the writer's erudition. Why then should we not exhibit bark in the interval as well as during the paroxysm of gout, if we can diminish the severity of its pains? It may be dreaded lest, by suppressing the attack, the disease should become wandering or retrograde; but observation proves, that notwithstanding the pains and some other symptoms are evidently lessened, the paroxysms indeed are shortened but not extinguished. It is worth remark too, that in those cases where the gouty action is imperfect in the joints, it is thought necessary to preserve the stomach from the deposition of what is called gouty matter, by the use of tonics, such as bitters and stimulants; and among the rest, bark infused in wine is particularly recommended. It is therefore reasonable to hope, that at the access of a gouty fit, whether regular or atonic, bark is so far from being likely to obstruct the endeavours

endeavours of the system, that, given in large doses, no remedy seems better calculated to assist them.

Another still closer analogy has gout with diseases of the nerves, in which bark is a wonderful remedy. Not only the nature of the symptoms but the causes are common to both. Prostration of appetite, nausea, dyspepsia, vomitings, flatulence, pains, spasms about the region of the stomach and in other parts of the body, the belly at one time lax at another constipated. Hypochondriac symptoms, such as fearfulness, uneasiness, impatience, besides many other complaints, are only those nervous symptoms which often precede a gouty paroxysm, or harrass the patient as the fit declines. The facility with which the gouty pain shifts from one part to another, leaving the first free, shews a nervous affection afterwards connected with local inflammation. All modern authors admit the importance of bark in nervous complaints. These are the principal diseases described by Tissot in his remarks on the diseases of studious men, and of such as are addicted to excessive venery; and for these, in common with other authors, he recommends the bark. The very causes above mentioned, viz. close application, a sedentary life, and excessive indulgences, by the weakness they induce, become the exciting causes of gout, and should seem to require similar remedies.

Peruvian bark holds the first rank among bitter remedies. 1st. Because, to use the language of Murray, it strengthens most without producing heat. 2dly. Because it may be accommodated to every temperament, as daily experience shows in the cure of intermittents. 3dly. Because, by long continued use, it produces no atony in the stomach, which is not the case with other bitter remedies. Physicians have long since given up the vulgar dread that bark, in too large quantities, produces obstructions in the viscera, scurvy, and other complaints, which the observation of later ages prove to be unfounded, and that the general error has been not in the excessive but the sparing doses of that remedy. We ought not to wonder if, for the cure of so stubborn a disease as gout, a large quantity of bark should be necessary, as we all know that obstinate agues require as much or still more. Nor ought we to be surprized if the gout returns at determined distances of time, since the same happens not only with quartans, but with the milder tertians; and certain it is, that there are persons in whom ague, however often cured, seems to return occasionally like a constitutional disease. Still further, it  
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has been shown that bark, given in smaller doses than will consume two ounces in the first two days, will be less successful, though not without its effects. From all which, it follows, that whatever propriety there might be in the cautions against the improper exhibition of bitter remedies, there can be no danger of the use of bark, even in the large doses above prescribed.

On the respectable authority of Sydenham, we might apprehend the exhibition of a purge in the beginning of an attack. That celebrated author entertained this apprehension even at the close of the paroxysm, and was fearful, during the intervals, lest purges might hasten a return. He appears however, afterwards, to have become less fearful, (*de mictur. cruenta*) and advises that, after a purge, an opiate should be given, to lessen the nervous irritation excited by the former. I might further assert, that many gouty paroxysms have, in myself, yielded to spontaneous bilious evacuations; and without recommending such a practice, am persuaded, that by promoting such evacuations, some paroxysms have been shortened, and others prevented. Laying aside the almost obsolete notion of gouty matter, which by such stimuli may be transferred to the intestines, it must on all hands be allowed, that by such evacuations the disposition to plethora must be lessened, any accumulation in the bowels removed, and the bark produce its full efficacy. The experience in my own case seems to confirm this. Though I found some relief from the bark only, it was less than others had done, nor was I restored to health till after a brisk purge.

Boerhaave\* was not afraid of purges in gout, and particularly recommends those which he calls serous, and which he advises to be quickened by mercurial preparations. He proposed to his old arthritic friend, Bassand, the powdered scammony with unwashed calx of antimony. Van Swieten was so well satisfied with this doctrine, that in his commentary on the passage he does not scruple to recommend it, after examining the foundation of the practice, and adding the result of his own observations. There are not wanting gouty subjects, who conceive they have escaped the return of paroxysms by taking a purge every week. Dr. Joseph Quarin (*Animadvers. cap. 15, p. 290*) observes, that the body should be occasionally opened during

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\* Aphorism 1276.

during the paroxysm with the saline mixture of rob. sambuci, whenever the previous mode of living has been too free, if the tongue is foul, and the heat considerable.— Andrew Szootes\* recommends eccoprotics, such as lenitive electuary with sulphur, some grains of rhubarb with manna and tamarinds, when the previous symptoms of gout appear, in its first, and in all its subsequent stages. Hoffman gives it as an axiom,† in all cases of pain, to purge before the exhibition of any other remedy. By these means, wherever the pain is situated, it is rendered milder, as, he asserts, he has repeatedly experienced in his own person.

My friend, Professor Lemos, very prudently exchanged the violent drastic proposed by the barber for Epsom salts, which he gave in a sufficient dose gently and copiously to cleanse the primæ viæ, and the better to ensure the efficacy of the bark; yet there are people with whom these salts disagree, producing nausea and vomiting instead of the desired effect. A mixture of tartarized infusion of senna with the salts, or with a small dose of tincture of jal-lap, will answer every purpose; and should the system seem too much agitated by this medicine, it has been before remarked, that the antispasmodic powers of the bark will be likely to relieve not only this inconvenience, but even that restlessness, impatience, and irritability of temper so characteristic of this disease. In my own case I have remarked, and it often happens in others, that the first doses of bark prove purgative; but notwithstanding this, I found the advantage of cathartic remedies; and the best practitioners are of opinion, that in intermittents the bark is more efficacious if preceded by laxative remedies.

There are not wanting such as maintain, that the inflammatory diathesis is a contra indication to the use of bark. But besides the authorities already produced from the best writers, and that the celebrated Storck treated pleurisy with extract of bark, we may further remark, 1st. that the pain from gout precedes the inflammatory symptoms nearly twenty-four hours; 2dly, that even the gouty inflammation is no objection to the use of bark, because this inflammation terminates only by resolution or desquamation, never producing suppuration, scirrhus, nor gangrene;

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\* Collectio Dissertat. circa morbos chron. Stollii, t. 1.

† Medendi Rat. Systema, tom. iv. p. 2, S. 2, c. ii.



grene; in these respects approaching nearer to the erysipelatous. In these cases, Dr. George Fordyce (following Haller,\* who found benefit from bark in his own person, when at the same time afflicted with erysipelas in his head and gout) asserts, that bark may be given with advantage, urging, that in the erysipelatous malignant sore throat, bark should be given in large doses. He afterwards extended the use of this remedy to all erysipelatous inflammations immixed with phlegmon, and even found it advisable to give it in the dose of a drachm every hour, if the stomach would bear it.†

Some advantage may arise from hinting at such other remedies as may increase the efficacy of bark, and hereafter bring it into more general use. No preparation is better than the powder during the paroxysm; but to patients of an extremely irritable stomach, the cold infusion may be equally servicable. Cullen and Lewis both inform us, that this may be made in less than twenty-four hours. If the powder is taken, it should be diluted in water, or being only wetted, it should be placed on the tongue, and swallowed by the assistance of water. Other changes may be made, according to the discretion of the physician.

When the inflammation is very violent, the application of leeches to the part may very much assist these other means. Before I was acquainted with the virtues of bark, I have frequently found the advantage of leeches in relieving the pain, when its violence induced me to expect a proportionate inflammation. But only in a single instance did I find the paroxysm shortened, though the bark has constantly produced that effect. There is reason to hope that both these assistances, preceded by a purge, may produce the best effect.

It has been already remarked, that the solution of guaiacum has shortened the paroxysm. There can be no objection therefore to the use of it at night, to produce a gentle perspiration after taking the bark. In order to fulfil every indication, it may be right to consider what diet will be the most suitable. This may done in a few words. Light nourishing food, easiest of digestion, gently spiced, and taken according to the powers of the stomach, and previous exercise: flesh not too strong at dinner; a sparing

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\* Disput. ad Morbor. Histor. & Curationem. No. CLIII. tom. vi. p. 836. towards the bottom.

† Transactions of a Society, &c. page 290 to 293, Art. xvi.

sparing and vegetable supper not protracted too late at night. It may be a question whether fish is proper for gouty subjects. If not oily or hardened by long salting, or dressed so high as to excite an unnatural appetite, there can be no objection to their use. On all these subjects, the common cautions have been so often repeated as to render it unnecessary to say more. Twelve years ago, I found fish so very hurtful to my own constitution, that before the conclusion of the first week in Lent, I was seized with gout, and found it necessary to return altogether to flesh. On the day, or the day succeeding a dinner of fish, I found threats of a gouty attack; but since the use of the bark, I have not only derived the advantages above mentioned, but during the Lent of this year, 1802, have confined myself to fish without any inconvenience. Those who are accustomed to drink wine with moderation, need not alter their habit, and for others a small quantity of Port may be serviceable. Water more or less cold, according to the season, but still cold, is very serviceable, taken in the morning fasting. Thin chocolate is the best breakfast, and a small quantity of coffee should be taken after dinner. Tea, and other liquors of that kind, may be thought hurtful by weakening the stomach; on this subject, custom and experience must be our guide. Sleep should be moderate, and at proper seasons: the patient should retire early to a bed not too soft, which he should quit early in the morning. He should avoid those evacuations which are not indicated. He should cultivate a cheerful mind, avoiding as much as possible those reflections which may sour his disposition, and also too close application. In short, the common rules for preserving health should be attended to in a particular manner by gouty subjects.

Excepting the customary injunction for what are called the non-naturals, the patient should avoid all medicines for a month or two, that he may be the more susceptible of their effects. At the end of that time it may be advisable to take a gentle purge, and afterwards an ounce of powdered bark, or a pint of the vinous infusion, or somewhat more of the cold watery infusion, or a saturated decoction for four days. Those who are troubled with phlegm, may add a small portion of Aristolochia, or wherever a stimulant is necessary, the powdered Aron may be a useful addition; or, if the stomach seems averse to these remedies, the steel wine may be exhibited alone or with some spirituous compound. The vitriolic acid with alcohol (liquor anod. mineral. Hofmanni) may be given in  
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sugar with advantage. After this, the patient should abstain from remedies, and attend only to diet.

Frequent exercise is the most important consideration during the interval of the paroxysms. It may be varied according to circumstance, by walking, riding, or gestation. It is certain, that on the decline of the paroxysms, they are much shortened by exercise. Sydenham advises it; reason and experience confirm his advice. I can with truth attribute the shortening of several paroxysms to using my feet whilst that use was still painful. They always mended as I proceeded, and long rest constantly induced a return of pain.

Having thus faithfully translated all the facts offered by Professor Tavares, your readers will be satisfied with a more general account of his remaining reflexions; or such as wish more minutely to peruse them, will refer to the original.

Cold bathing, as assisting the purposes of the bark, is advised either in the sea or at home. If the latter, the author prefers ablutions with sponge, or if bathing is preferred he advises only a single immersion; if in the sea, the time of bathing should be left to the sensations of the patient. The usual cautions are added.

Under all these means, Dr. Tavares only promises an alleviation of a disease for which the patient must have a predisposition. By this we conceive is meant, that the predisposition being a part of the original constitution, cannot be altered by remedies. But by his own and some other cases, it appears that not only the paroxysms may be shortened, but their return much protracted.

Some remarks follow on the importance of accurately distinguishing the disease, the state of the patient under it, and the necessity, in some instances, of producing a full fit for the relief of the whole frame. In all these cases, he wishes the patient to take the advice of an experienced physician, and, as an illustration, adds (in a note as it probably occurred after the work commenced) his own case in the year 1802,

On the 9th of June, without any previous apparent cause excepting the great and sudden changes of weather, he suffered a violent cramp in the whole course of *musculus peroneus longus* for near twelve hours. As it went off, a shining redness appeared for three days. As this vanished he felt restlessness, anxiety, palpitations of the heart, impatience, slight vertigo, and lastly a sense of pain and heat coming on in both knees; all the former symptoms (the fore-

forerunners of a gouty paroxysm) were diminished. Suspecting the beginning and progress of a paroxysm, he waited patiently for its more complete formation, continuing his accustomed occupations, and using no remedy. On the 16th day of the month, the uneasiness in the knees going off, an obscure pain in the wrist threatened gout in that part; but suspecting a sluggishness in the attack, he took only two drachms of bark, either to throw out the disease or stop it, avoiding a repetition of the remedy lest he should interrupt the efforts of nature. Two hours after midnight of the 17th, a manifest and violent gout appeared in the wrist. After it had raged for sixteen hours, and whilst the inflammation was still high, and a white lateritious sediment appeared in the urine, he began taking the decoction of bark in the manner advised for intermittent fevers. After the third dose, a remission of pain began, which gradually lessened, so that he enjoyed a good night's rest. Neither the swelling nor inflammation subsided, but the motions of the hand and arm were now only impeded by their increased volume and not by pain.

After this follow some remarks on the different kinds of bark, a subject which has been amply discussed at home. The author also suspects that the white willow bark may be found efficacious in gout, as he experienced its usefulness even in obstinate intermittents.

Particular respect is due to the observations of an arthritic physician, on whatever relates to his own complaint. The use of opium, in all its preparations, he condemns from his own experience and his conversations with his brethren. The necessity of gradually augmenting the dose is strongly urged, and inconveniences thence following to the nervous system, by which the irritability of the constitution is much increased. Warm bathings of every kind are objected to for similar reasons, excepting the warm sulphur and sea or salt-water tepid baths. Even these the Professor objects to during the paroxysm. As to pediluvia in warm water, mixed with marine acid, though recommended by Dr. Rowley during the gouty fit, our author thinks should rather be used during the atonic or indolent stage.

The whole concludes with expressing, that the Author conceived it a duty to give the world gratuitously those instructions which he had received from motives of friendship, and to strengthen them with very few facts, compared to the number he might have offered: requesting

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an impartial consideration of his labour and a reciprocal readiness of communication in his Brethren.

Though the Medical world have perhaps relaxed a little in their terrors relative to evacuations in gouty people, yet the practice of giving bark in such large and repeated doses is, I believe, new in England. The Author's reflections also relative to the analogy between that disease and intermittent fevers, deserve notice, for though generally intermittents arise from a peculiar miasma, yet other causes will produce them. Other topical pains also have shown regular intermissions, and been cured by bark. But the extensive field of observation which our Author possessed, entitles him to particular attention in his remark, that gouty people, rarely, if ever, become the subjects of ague, and that in damp, aguish situations, gout is most prevalent. Professor Tavares' office as *Archiatro*, gives him the most extensive correspondence; and it is well known, that the country along the banks of the Tagus for a considerable extent in Portugal, is marshy and aguish. I might add, as a further analogy, that during my eight years residence in the delightful Island of Madeira, I saw no case of ague, nor scarcely of gout, among any of the natives; nor is there any swampy ground in any of the inhabited part of the Island. This hint is thrown out, that the readers of your extensively circulated Work, may improve it by observations on the air, situation, and diseases, of their respective circles of Practice.

I am, &c.

London, June, 1804.

JOSEPH ADAMS.

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REPORT OF THE COMMITTEE OF THE HOUSE OF COMMONS  
on the PETITION respecting the FEVER INSTITUTION.

THE Committee, to whom the Petition of the several persons whose names are subscribed thereto, being Members of the Society for bettering the Condition of the Poor, was referred; and who were empowered to report the matter of the said petition as it should appear to them, with their observations thereupon, to the House; have, pursuant to the order of the House, examined the matter to them referred; and have agreed to the following Report.

Sir Walter Farquhar, M. D. having been examined, informed your Committee, that to his knowledge and experience

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rience the infectious fever was very prevalent in London, particularly among the poorer parts in confined situations; that, from information, which he repeatedly had, and on which he could rely, he had reason to believe that more than three thousand persons have annually died of it in and about London. That there could be no doubt that a house for receiving patients in the fever, would prevent the spreading the infection; particularly, if the houses from which the patients are removed, were properly cleaned and white-washed, and still more so if the bed cloaths, and also the patient's cloaths were burnt immediately. That he had known the most fatal consequences follow from the neglect of this precaution, even in the instance of a single article coming from an infected person. That he did not conceive that an establishment, on a sufficient scale to answer those beneficial purposes, could be formed in the metropolis without public aid, and had no scruple to say that he believed it impossible. That the infection is likely to be generally communicated, by the necessary intercourse subsisting between servants and other members of large Families, with persons in the lower classes of life, among whom the infectious fever more commonly prevails. That he has known repeated instances of its being so communicated to persons in the higher classes of life, particularly among children, and has found it necessary to lay it down as a rule in families where he is consulted, that the nurses should never have any communication with friends in their own houses, or with others they may casually meet. That there is good reason to hope, that by the judicious, diligent, and persevering efforts of such an institution as has been alluded to, that the infectious fever may be very considerably diminished, and even in the end almost entirely extirpated from the metropolis. And that the extinction of the infectious fever in the metropolis, would very greatly tend to prevent its taking place in those parts of the country which have a communication with it, more especially as the fever generally remains lurking in the constitution for some time before it prevents the patient from travelling or following his usual occupations. That it is of great importance in the cure of these fevers, to attend to them in an early stage; and general attention cannot be given to patients so infected in the wide extent of the metropolis, except by the establishment of an institution upon a considerable scale, and very carefully directed, so as to be capable of receiving all the infected persons who may apply. That the poor when in  
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their own houses, labouring under the infectious fever, must always be attended by their friends with hazard; and though some peculiar constitutions may escape, in general the attendance must be highly dangerous.

Maxwell Garthshore, M. D. having been examined, also informed your Committee, that an institution to prevent the spreading of contagious malignant fevers, has been established within these three years in Gray's Inn Lane Road, which, although upon a very contracted scale, previous to February last received 325 fever patients, of whom 289 have been dismissed cured, and the houses of many of them, and others, purified, white-washed, and cleansed; 29 died, and seven then remained in the house. That he does not think the present establishment sufficiently extensive, to remedy the evil of the infectious fever in the metropolis. That a public institution would afford means both of preventing and curing the infectious fever, which cannot be practised in the houses of the poorer classes of society; but that he is of opinion that a public institution, of sufficient extent to remedy the evil in the metropolis, cannot be established by private subscription unassisted by public aid. That it is of great importance that the infectious fever should be attended to in its early stages; and that he believes that not one case was ever taken into this institution in an early stage, which was not soon recovered, it being a disorder the prevention and cure of which are perfectly well understood. That the infectious fever has prevailed for a long course of years in some of the crowded parts of the metropolis, in a more or less degree, according to seasons and circumstances.

Thomas Bernard, Esq. having been examined, likewise informed your Committee, that the London Fever Hospital in Gray's Inn Lane was established in May 1801, and a House of Recovery opened in Gray's Inn Lane in February 1802. That great exertions have been made in every possible way to obtain subscriptions, and yet the present funds are not equal to the maintaining that small house on the present scale. That the whole sum which has been raised by donations and subscriptions, has amounted to £.4378, the annual expences of the house are between £.600 and £.700, and that the house is not adequate to one-tenth part of the patients who want relief, as it contains only sixteen beds. Finding that this establishment will not be adequate to the purpose, the society have begun raising a fund of £.3000, and £.1600 has already been subscribed, upon condition that parliament would grant such a sum,

as, together with those subscriptions, would prove effectual to the desired object.

Upon the whole, your Committee find that the infectious fever has been long prevalent among the poor of London, and that above 3000 persons have, on an average, annually died of it within the bills of mortality.

This evil appears to your Committee to have continued for want of some regular system being adopted to check its progress, and to purify the houses and other buildings in which it has prevailed. In May 1801, an Institution for the Cure and Prevention of Infectious Fevers in the Metropolis was established by the Society for bettering the Condition of the Poor; and in February 1802, a London House of Recovery was opened, in which, although it contains no more than sixteen beds, upwards of 320 fever patients have already been cured.

This establishment has been hitherto supported by the contributions and subscriptions of individuals, and nearly the whole of £.4000 so collected has been expended upon it. The extent of the institution appears to your Committee insufficient for the attainment of its object; and although great exertions have been used, it has not been found practicable to raise, by private subscriptions, funds large enough to increase or support it, more especially as it is essentially necessary to destroy the cloaths of the patients, and purify the houses in which they have been attacked by the complaint. In the expectation that, towards an object of so much national importance, aid might be afforded by the legislature, a sum of £.1600 has been subscribed by several individuals, upon the condition of such assistance being first received. The Institution cannot, therefore, have the benefit of this bounty, without it is also supported by Parliament; and, upon the whole, it appears to your Committee, that the object of the petition is of the highest importance, and that the proposed Institution would be productive of great public advantage.

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

I Had hoped that the war of words had been no longer an incumbent duty on the believers and propagators of that great blessing to mankind, promulgated by Jenner; and,



and, that the lancet only, and not the pen, was the sole instrument needful in the dissemination of their principles. I thought there could be no longer enemies to its general establishment, but such as were inaccessible, from refusing (through prejudice) the aid of their senses in informing their judgment. To have persevered in contention with such, would have been 'waging an inglorious war;' they might, without dereliction of duty, been left to have suffered by themselves or kindred, that merciless affliction for which the cow-pock is so mild and safe a substitute.—But the pamphlet of Mr. Goldson, and the opinion of a very respectable physician of this city, who had read that pamphlet, and who, to my concern and surprise, declares his belief, that those who have had cow-pock are liable to small-pox, and that the cow-pock does occasion peculiar and foul eruptions; shews that I was too sanguine in my expectations, and that it is yet necessary, that those who have had experience and conviction of its importance and utility should not be silent.

It is now four years since my doubts of the mildness and security of cow-pock have been subdued, by previously learning and observing all I could on the subject. Since that time, I have had considerable opportunities of confirming or invalidating my opinion, arising from being inoculator at one of the stations of the R. J. Society, in a very populous neighbourhood; from private practice, and from being a member of the medical council of the R. J. Society, the duty of which council it is to investigate all cases of vaccination attended with peculiar circumstances, whether arising from coincidence of other diseases, suspicion of insecurity, imputation of small-pock succeeding cow-pock, or any consequences arising from vaccination; and having given all the attention I was able to all these points, I do most solemnly declare, I have not seen the small-pox take place after the cow-pock, nor have I ever seen the peculiar and foul eruptions, or any other arising from cow-pock.—But I have witnessed the most foul conduct among its adversaries; one out of many (because it is very recent) I will relate: A woman called with her child to consult me about vaccinating it, but her mind was not quite decided; because, she said, her husband was averse to it, and a neighbour of hers had a child now dangerously ill with the cow-pock. I assured her there was no danger from cow-pock, and I vaccinated the child. I asked her a few days after how the child was that was so ill of cow-pock; she answered, that since her own had been

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done,

done, the *same* woman said her child had not been inoculated, and was ill from teething only. This appears to me to have been a contrivance between the woman who pretended her child had been vaccinated and the father of the other child, to prevent the vaccination of the one that was brought to me. This report would reach the ears of many whom the falsehood of it would not reach. The woman whose child I vaccinated, said the other had since thought of having hers done; but the medical gentleman told her the child would have breakings out spring and fall, so advised her not, but to have it inoculated with the *natural* sort.

In proof of the sincerity of my conviction, I have vaccinated my wife, two children and a female servant, in my own family.

With respect to Mr. Goldson's pamphlet, it is certainly interesting, and bespeaks a man who would write very creditably on any subject with which he was well acquainted, but he does not even pretend to have had much experience in cow-pock. His book is, therefore, either quite nugatory, or proves a great deal *too much*. Can any rational person believe so many cases of the small-pox supervening cow-pock can have happened, in a limited and private practice, to one practitioner, when none have manifested themselves to several who have had very extensive experience, both as public and private practitioners; for such is the testimony of Dr. Woodville, who, with his coadjutor, Mr. Wachscl, have vaccinated their tens of thousands; such is the testimony also of Dr. Jenner, Dr. Pearson, Mr. Ring, &c. &c. who have vaccinated their thousands.

The following is published under date of the 20th June, 1804, by the Society under the direction and inspection of Dr. Pearson.

" In the *last* fortnight, a number of subjects who had undergone vaccination in the year 1800, have been submitted to the test, or counter proof, (variolation) in circumstances the most favourable for exciting small-pox; also subjects who were vaccinated in Dr. Pearson's early practice, in 1799. The evidence from which demonstrates a uniform series of facts the reverse of Mr. Goldson's conclusions.

" What is the rational inference from all this, but that Mr. Goldson has been misguided by some fundamental error in his practice. But should it be found (though I believe it has not yet occurred) that one in many thousands has the small-pox after having had the perfect cow-pock,  
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it is no more than has happened after the small pox itself, according to the testimony of some of the most experienced practitioners; and the most ardent advocates for the cow-pock, do not pretend that it is a surer preventive than the small-pox itself. If it should continue to be urged, that the antidote only operates for a time, may I ask these gentlemen what time they mean? I flatter myself they will very soon be impelled by facts to name such a period, as not one in ten thousand of the youngest of our patients (though vaccinated) are likely to survive. There are many instances supported by most respectable testimony of persons resisting every known mode of communicating small-pox; ten, twenty, thirty, forty, and even fifty years after having had the cow-pock.

“ Dr. Jenner gave us the following (four years ago) not one of which have been disproved or contracted.

|                 |    |                |
|-----------------|----|----------------|
| Josiah Mernet   | 25 | } Years since. |
| Sarah Portlock  | 27 |                |
| Jn. Phillips    | 53 |                |
| Mary Barge      | 31 |                |
| Elizabeth Wynne | 38 |                |
| Wm. Stickcomb   | 10 |                |
| Hester Wakeley  | 26 |                |

“ William Fermor, Esq. of Tusmore, Oxfordshire, the following :

|                     |    |                 |
|---------------------|----|-----------------|
| Wm. Tredwell        | 3  | } Years since.” |
| Alban Collingridge  | 4  |                 |
| Mr. Stevens         | 27 |                 |
| Thomas Slater       | 6  |                 |
| Mr. H. Collingridge | 10 |                 |

Many similar facts have been published by Dr. Pearson and others. Dr. Woodville inoculated more than one thousand after cow-pock, not one of whom had small-pox. Such are the arguments the advocates have in support of their opinion; and although there is nothing new in this statement; I have thought some good might arise from repeating them in your Journal, finding, to my regret, that the old adage of, ‘None so deaf as those who are unwilling to hear,’ is applicable to this subject. I feel it a high moral duty, possessing the sentiments I do of the cow-pock, to offer them again to the senses of those on whom little impression has been made. I would intreat them to lend their ears, their eyes, and their understandings, unbiassed, to a subject in which the community in general, and the low and indigent in particular, are so greatly interested.

I have very lately (and I reflect on it with the greatest satisfaction) by this mild preventive, rescued a poor mechanic, his wife, and four children, from the terrors of that merciless disease the small-pox; who had left the country (where he found all his exertions inadequate to their support) for this town, where he hopes to be more successful, but where it was next to impossible they should all escape the small-pox; and if one had taken it, it must have communicated to all: — then, how truly deplorable would have been their situation, who would have had to struggle some weeks under the pressure of disease; and, after what is usual (in such cases), parting with their garments and other necessities, those who survived the wretched wreck of disease would, in all probability, have found themselves in a workhouse or a jail.

And what is the contrast under vaccination? The father has not lost a day's labour, the mother has not been suspended an hour from the numerous duties which such a family of young children must require of her, nor called a minute from other cares to attend to the moans and sufferings of her children!

Can any humane mind be insensible to these advantages? Will any good man *abandon* or *discourage* the progress of a discovery, which, to say *only* what I trust its greatest opposers will confess, has the support and credence of the most enlightened philosophers, experienced practitioners, and philanthropic characters, that adorn and illumine the present gloom and deformity of our hemisphere.

I am, &c.

Cophthall Court, July 14, 1804.

L. LEESE.

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

Salisbury Square, 13, vij. 1804.

**W**ILL ye have the ingenuousness, the candour, to insert in your next Number, a most sincerely meant censure upon yourselves? While the sentiment of Horace, *Sunt delicta tamen, quibus ignorasse velimus*, may on this occasion be generally the feeling of your readers; I confess for myself, that on your treatment of the great subject of Vaccination, *Indignor quandoque bonus dormitat Homerus*. How could ye, in your Review of Goldson's pamphlet, think

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of taking up the time of your readers in considering what were the merits or demerits of the medical men in any particular neighbourhood remote from, or near to, 'Head quarters of science!' Whichsoever seat of the Muses be the head quarters of medical science in the British empire, mails, stage-coaches, &c. are the never failing *aids du camp* which convey the '*ordres du jour*' throughout, and beyond the whole imperial field! But, chiefly, on the subject which forms the *title* of the pamphlet, I have never seen you so flat; and, pray, what can ye have meant by the entire pamphlet claiming "an attentive perusal from all the partisans, friends and well-wishers of Dr. Jenner's discovery?"

Ye have promised yourselves too much, if ye have expected that the pernicious pamphlet would hereby become extinct; but, I correct myself: It occurs to me, that ye may have thought it ought to be in the hands of every friend of vaccination, that they might always have it in their power to shew the fallacy of the author's conclusions, the incompleteness of his statements. In the consciousness of his own unwavering veracity, he seems quite to have forgotten that the statement of medical cases requires judgment as well as truth, and that the proof of the concurrence of both in the report is always due to the reader, who may have perhaps never before heard the name of the author, and who owes no credit to his *ipse dixit*.

Since my last, it has occurred to me, that I may myself have appeared somewhat deficient in not offering any authority for the statement of the pamphlet being gratuitously distributed. I could not, without a sort of breach of confidence, unveil the springs whence the streams have already borne it away so far and wide throughout the empire; but I may give some idea of the activity and extent of the diffusing influence, by the mention of the arrival from Dublin of a professional friend, who received it a few days before his leaving Ireland, without note or message, in an *envelope* with the following address: James Rivers, Esq. 26, Queen Street, or at the Hospital of the House of Industry, Brunswick Street.

Pythagoras, in the fulness of his joy, is said to have sacrificed a hecatomb to the Muses, on his discovery of the proposition which forms the 47th of Euclid. How happens it that our author, on his supposed discovery so shockingly serious, possesses an apathy more than philosophic? I once saw the captain of a Guineaman drink glass after glass of brandy, till he fell asleep on his chair. "There

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is a man, said one of the company—but the tear of compassion never moistened his cheek." Where were all the sympathies, the ordinary feelings of humanity, when our discoverer should have revealed to the world, that the Jennerian inoculation might not ultimately prove a permanent prophylactic; that the Small Pox, at some future period, might become a greater scourge to the world than ever? Does any expression of regret or sorrow escape him on the melancholy occasion? With all his anticipation of a *Vox in Rhama, lamentatio, et fletus, et ejulatus multus*—the Rachels *plorantes suos filios* seem neither to have excited his sighs nor tears. Like the geometricians and chemists of Burke, 'bringing from the dry bones of their diagrams, and the soot of their furnaces, dispositions that make them worse than indifferent about those feelings and habitudes, which are the supports of the moral world,' he is too much absorbed in his favourite object. He seemeth a Gallio, not to care for these things. But let us hope he only seemeth. He wishes not to provoke controversy; and he has provoked it. He *only* asks for further investigation; and further investigation is not wanted. Let him inform himself of what has been already done. I hope he will shortly be fully convinced that he has hitherto only been 'puzzled in mazes, and perplexed with errors;' when a most respectable, a truly honourable, duty may fall to his lot, that of making public acknowledgement. This is the conduct I took upon me to recommend more than ten years ago to the Yatton demoniac, from whom about seven devils should have been exorcised, by perhaps about as many fanatical preachers at Bristol; but in this case the confessor may neither have to say *peccavi* nor *poenitui*, but simply, 'whereas I was blind, now I see.'

Having taken the liberty of introducing the grave subject of moral habitudes and feelings, and even of insinuating an inattention to them on the part of our author, let me beg of him to excuse this greatest possible breach of liberality. It is a very easy thing to make fine professions of humanity. I have learnt to set very little by them, from hearing so much of them amid the revolutionary storms of the fickle nation, where I had only to turn my eyes to a public building, to be disgusted with the discordant inscriptions "*Humanité, Fraternité, &c. ou la mort.*" Let us hope then that William Goldson, with every appearance of apathy amidst his death-threatening alarms, may yet feel as a man. As such I would wish to congratulate him on his own total failure. Yet a little, and he may

may have to declare to the world, I am happy, supremely happy, in being at length fully convinced that all my conjectures on the inefficacy of the Jennerian Inoculation were erroneous.

“ The grateful nations one loud psalm raise ;  
A wond'ring world resounds our JENNER's praise.

18, vii, 1804. Will the extreme importance of the subject (Vaccination) on which I have ventured to commit myself before the medical world, through the medium of your Journal, induce you to receive yet a few words more, probably the last I shall now have to offer? They are excited by, or rather extracted from, the “ Answer to Mr. Goldson, by John Ring, member of the Royal College of Surgeons.” I can neither adopt the *nunc dimittis* of Simeon in the Temple, nor the last dying words of Wolf on the heights of Abraham, on this occasion ; but my joy is great. The estimable author, in the consciousness of having done his duty, of not having lived in vain, may derive something of this last consolation of the human heart. He has furnished ‘an antidote to the poison.’ How completely he has done it, ye will no doubt have to shew in criticising the work ; but do give me leave to point out to your anxious readers (Medical and Physical Journal, page 553, June, 1804) how little dependance they ought to place on the accuracy of the statements which may have excited their alarms.

Page 7. “ As Mr. Goldson assures us he does not wish to spread vain alarms, and that he should not think himself justifiable in concealing the cases which have fallen under his observation ; it is difficult to conceive how he could think himself justifiable in bringing forward a partial statement of a case, and concealing a circumstance, which alone is sufficient, in this instance, to vindicate the character of vaccination from the charge he has brought against it.”

“ It must be recollected, that if Mr. Goldson is not accurate in his statements, if the fidelity of his narrations can be impeached, whether the fault be a treacherous memory, or too many other avocations, his whole testimony must fall to the ground.”

Page 8. “ Mr. Goldson is an active magistrate, and a surgeon in considerable practice. It is therefore more liberal to suppose, that other avocations prevented him from attending to the case like an affectionate parent ; than that he would have suppressed any important facts, in order to make it appear, &c.”

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Let me now conclude by giving you the address of a few more applicants from the southward, for matter at the Central House; but, without any comment, lest William Goldson should again discover many wilful misrepresentations, as he asserts, but fails to prove, while he entirely forgets to attempt to defend all his incautious or unguarded statements, against the unmannerly remarks of

Yours, sincerely,

JOHN WALKER.

" Lord Seaforth, Governor of Barbadoes (Portsmouth, on his way to the West Indies)

Mr. Tristram Harper, Gosport.

Mr. Tupper, on his way to Guernsey.

Mr. F. Weber, Hilsea Barracks, Surgeon to the King's German Legion.

Mr. Mill, Hilsea Barracks, Ensign of the 1st. West India Regiment.

Edward Jackson, Guildford.

Morris Birkbeck, Wanbro'.

Mrs. Lewin, Ridgeway Castle, Southampton.

Lord Egremont.

T. Hodson, Lewes.

C. Morgan, Henfield.

The Widow of Don Manuel Azlor, Viceroy of Navarra.

The Count de Bureta, of Saragosa.

Mr. Long, Hailsham."

We have no objection to shewing our candour by the insertion of Dr. Walker's reproof; and we entertain no doubt of his perfect sincerity in the great cause of humanity. But surely he would not wish us to set ourselves up as Dictators. We shall always wish our Journal to be a 'Ulysses's bow, on which every man of genius and learning may try his strength and skill.' If any man fail in his attempt to bend it, he only exposes the impotence of his arm; his shafts fall harmless. And the giving publicity to such failure, we consider as one of the most important services that we can render to science and to humanity. EDIT.

### *To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

**W**AR and disease are the concomitants of our existence. Human nature seems pregnant with the seeds of these evils even on its birth. Both oftentimes assume an almost unlimited extension in their devastating powers, by which all descriptions are precipitated into Eternity. The miscellany of human suffering galls even the pen of traditional fidelity, and often deters the mind's retrospect into



into the complication of misery—the direful consequences of war and disease. But the historian must not stop here, every event is incumbent on him to relate; the concurrence of contingencies, the unique influence or the complex issue from the co-operation of efficient principles, and the eventful explosion of preconcerted plans, form the field for his historical powers. The faithful delineation of a campaign challenges at once all the warm emotions of the breast; a patriotic enthusiasm is excited at the recital of native valour, and the ardent glow of sympathy, cherished by the tale of extraordinary virtue and valour, follows with gratitude the victor to his grave.—What breast was not animated with every worthy feeling on the catastrophe of our brave Abercromby; and although misfortune deprived the field of our General, he will ever continue to live in the memory of a grateful posterity.—It is time that a true and accurate history of this great man's misfortune should be given to the world, and I therefore, through the medium of your invaluable Journal, call upon that gentleman (Mr. Gillham\*), whom that deserving and meritorious artist† has exhibited as the medical officer and operator on the occasion. There have been so many different accounts given to the public, and none of which being clearly and professionally detailed, that I embrace this period, although distant, to request of that medical gentleman, whom the public now recognizes‡ as the surgical attendant, to describe the precise place, depth, superficial extent, and external consequences or termination of the wound which occasioned the loss of the virtuous General. As I am confident that most medical men, and more especially those who served during the campaign in Egypt, are desirous for a faithful history of the case, and as Mr. Gillham has not given to the public the least information upon this important and interesting subject, I have not the least hesitation, from my personal knowledge of Mr. G. to assert, that the medical part of the expedition will be soon gratified by perusing the interesting particulars of the fatal case. I am, &c.

*Chancery Lane, July 12, 1804.*

AN OLD CAMPAIGNER.

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\* Mr. Gillham having received great and irreparable injury in his eyes from the powerful influence of the climate, has been placed on the invalid list, and now practices as a surgeon and apothecary in this metropolis or its environs.

† Mr. Porter, one of the most ingenious and meritorious artists of the present epoch.

‡ The picture of the death of Sir R. Abercromby, by Mr. Porter.

# CRITICAL ANALYSIS

## OF THE

### RECENT PUBLICATIONS

#### ON THE

#### DIFFERENT BRANCHES OF PHYSIC, SURGERY, AND MEDICAL PHILOSOPHY.

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*A Treatise on Gun-Shot Wounds, which obtained the Premium given by the Royal College of Surgeons in London, for the Year 1803, by T. CHEVALIER, 8vo. pp. 146, London, 1804.*

The Author of this valuable Treatise had for some time meditated the composition of such a work, when the Royal College of Surgeons, in the year 1801, announced Gun-Shot Wounds as the subject of a Prize Dissertation.

“ This induced me (says Mr. C.) to lay aside my intention, the fulfilment of which, I thought would probably be rendered unnecessary. But finding they were again proposed as a Thesis for last year, and thinking the circumstances of the times made it desirable that something should appear on the subject, I resolved to commit my ideas to writing, and to submit them, unknown, to the judgment of the College.

“ By this method I was sure of obtaining the unbiassed opinion of competent judges in the first instance; and their decision having been in my favour, I am more satisfied, than if I had merely asked the opinion of any friend, as a friend, or trusted entirely to my own.

“ It may however be proper to observe, that the object I have had in view in writing this treatise, has simply been, to make a faithful and correct investigation of the characteristic phenomena of Gun-shot Wounds; to explain their effects upon indisputable principles in physiology and pathology, to point out those processes by which only nature can repair all that is reparable in such a complication of violence; and to deduce from thence that treatment by which she may be most effectually assisted in her work, and the obstacles to her performance of it in the best and safest manner, may be either prevented or removed.

“ Such then having been my object, while I hope my labour will not be in vain, I am desirous that the reader should avail himself of every other assistance by which he can perfect his knowledge of the subject, and illustrate the doctrines, or supply the deficiencies he may observe in this treatise. I would particularly recommend his perusal of the small, but masterly work of Le Dran on Gun shot Wounds, which I once had a thought of translating, and publishing, with such alterations as would com-  
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port with our later improvements. But I soon found that these must be so numerous as to make it not worth the trouble. I cannot however withhold my praise from a treatise, which I never take up without pleasure. The work of Ravaton is excellent in its kind. Those of the late Mr. Hunter, and of Mr. John Bell on the same subject, notwithstanding their difference in some particulars, are also well worth an attentive perusal. And perhaps in these four works will be found the substance of most, if not of all, that can be collected from former writers; freed from a number of errors, and enriched with many solid and judicious remarks. Many cases however, recorded in the Memoirs of the Royal Academy of Surgery at Paris, and in other works both in French and English (not forgetting the writings of old La Motte, and Mr. Serjeant Wiseman) will be of use to the student, if the circumstances in them which are of real importance be properly discriminated from the rest, and from the obsolete theories with which they are intermixed."

Mr. C. divides his Treatise into two parts; the first is devoted to the consideration of the true nature and character of Gun-shot Wounds, in which the Author treats of the "nature of wounds in general; the nature of contusion, laceration, hæmorrhage, and fracture; the operation of extraneous substances on the living solid; and the laws by which the course and effect of bodies in motion are necessarily determined."

Mr. C. concludes his first part with the following observations.

"From what has been said, may be seen the reason of that concussion or shock, (*ébranlement*) which is given, in many instances, to the whole system, by the infliction of a gun-shot wound, and which has been remarked by the best writers on this subject, to be often attended with grave, and even alarming effects; extending not only over the injured part, but affecting the system at large. For as the resistance to the shot is afforded, not only by the texture of the injured part, but also is in part made up by the connection this has with other parts, and with the whole body, these also will therefore participate in the violence; and they will do it so much the more, in proportion as the part immediately wounded, has from its attachments, its texture, elasticity, or importance to life, a greater connection with the stability, or with the functions of the rest. Hence a shot striking against a tendon or a bone in one of the extremities, will produce a greater concussion than if it struck only against softer parts; a shot striking against a muscle in action, will produce more concussion than if it struck against the same part of the same muscle at rest; and a shot striking the head, or wounding the liver, lungs, or intestinal canal, will generally bring on an instantaneous derangement of the whole system, with which the functions of these parts are so closely connected.

"To all this must be added, an alarm and apprehension which immediately come upon the mind, which is often increased by the uncertainty

uncertainty of the patient about his real state; but which, in wounds of some parts, the most determined courage is not always sufficient to withstand.

"Having thus endeavoured to analyse the phenomena of a gun-shot wound, considering it first as a complicated species of violence committed on matter variously organized, and also to explain its effects as violence committed on *living* matter; and having pointed out the processes which naturally ensue from each of these circumstances respectively, in order to shew the indications of cure which may be deduced from them, I shall now proceed to point out by what mode of treatment those indications may be most rationally and successfully pursued."

In the second part, Mr. C. delivers the treatment of gun-shot wounds, which he does, as he has before done the description of them, with great clearness and precision. But our commendation is not necessary to secure this excellent Tract an attentive perusal; the character of the Author, and the College of Surgeons have done it already.

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*Surgical Observations, containing a Classification of Tumours, with Cases to illustrate the History of each Species; an Account of Diseases which strikingly resemble the Venereal Disease, and various Cases illustrative of different Surgical Subjects.* By JOHN ABERNETHY, F. R. S. &c. &c. 8vo, pp. 263. 1804.

THE importance of an arrangement of tumours leading to an accurate description of their appearance, history, and treatment, must be admitted by every one. Impressed with this idea, Mr. Abernethy has for some years past made use of the extensive opportunities the practice of St. Bartholomew's allows him to select his different specimens, to exhibit them at his lectures with an arrangement he now offers to the public at large. To this last he was prompted by a consideration of the importance of the subject, and that it could only be undertaken by men of such large opportunities, though others might comprehend it when demonstrated. A still further inducement was, that the minds of men have lately been laudably incited to the investigation of cancer, in hopes of discovering a cure, that the society instituted for that purpose have proposed certain questions which the author has attempted to answer, and lastly, as much *collateral* knowledge is required to investigate any subject with accuracy, that probably this paper may tend to point out the required distinctions, and furnish such collateral knowledge. After these preliminary observations, the author introduces his definition by a few remarks on his predecessors.

"The subject of tumours occupies a considerable space in the works of the antient writers on medicine. They seem, however, to have considered the subject rather with regard to its name than its nature; for we find a great variety of dissimilar diseases collected. I cannot say arranged, under the same general title. The error has

has descended to us, and even in Dr. Cullen's Nosology we find diseases of arteries, veins, glands, tendons, joints, and bones, brought together under one order, and designated by the same name of *tumours*. Some of these also are merely enlargements of natural parts; whilst others are entirely new productions, having no existence in the original composition of the body. We have, I believe, sufficient knowledge of the nature of these diseases to class them more scientifically; and as this has not yet, as far as I know, been done, I shall endeavour to supply the deficiency.

"In the definition which I mean to give of tumours, I shall trespass as much against the usual import of the word, as nosologists have hitherto done in their classifications against the nature of the disease. For I shall restrict the surgical signification of the word tumour to such swellings as arise from some new production, which made no part of the original composition of the body; and by this means I shall exclude all simple enlargements of bones, joints, glands, &c. Many enlargements of glands are however included in the definition, as they are found to be owing to a tumour growing in them, and either condensing the natural structure, or causing the absorption of the original gland. Sometimes also the disease of the gland seems to produce an entire alteration of structure in the part; the natural organization being removed, and a new-formed diseased structure substituted in its stead. In either of these cases the disease of the gland is designed to be included in the definition; and the practical remarks which follow will equally apply to the same kind of diseased structure, whether it exists separately by itself, or occupies the situation of an original gland. The structure of tumours is also a part of morbid anatomy which deserves to be examined; since (as it did not come within the scope of the undertaking) it has not been fully discussed by Dr. Baillie in his very valuable treatise on that subject. Yet as he has given representations of glandular parts enlarged by a diseased structure of an entirely new formation; so I shall have the advantage of referring the reader to his accurate and expressive representations of some of those appearances which it is my purpose to describe. There is an observation of this judicious and accurate writer which I shall take the liberty of inserting, since it justly appreciates the degree of utility of investigations like the present: he observes, "That the knowledge of morbid structure does not lead with certainty to the knowledge of morbid actions, although the one is the effect of the other; yet surely it lays the most solid foundation for prosecuting such enquiries with success. In proportion, therefore, as we shall become acquainted with the changes produced in the structure of parts from diseased actions, we shall be more likely to make some progress towards a knowledge of the actions themselves, although it must be very slowly."

Nothing can be more just than these remarks, but we cannot help wishing the definition had been more pointed. If these tumours, which are found to grow in glands, are new formed parts,

(No. 66.)

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there could be no occasion for the exception. If a new formed diseased structure is substituted instead of the original organization of the gland, the same objection seems to occur. However in this respect, Mr. Abernethy is more culpable in his arrangement than in his definition. By subsequent passages we find, that in all these cases of tumours he conceives an economy is established for the support of themselves different from, if not independent of, original formed parts; at least such seems the case by the following passage, "Thus an organized concrete (coagulated blood) becomes a living tumour, which has at first no perceptible peculiarity as to its nature, though it derives its supply of nourishment from the surrounding parts; it seems to live and grow by its own independent powers: and the future structure which it may acquire seems to depend on the operation of its own vessels. When the organization of the gland seems changed into that unnatural structure, which is observable in tumours, it may be thought in some measure to contradict those observations, but in this case the substance of the gland is the matrix in which the tumour is formed."

"The structure of a tumour," continues our author, "is sometimes like that of the parts near which it grows. Those which are pendulous into joints, are of a cartilaginous or osseous fabric; fatty tumours frequently form in the midst of adipose substance, and I have seen some tumours growing from the palate, and having a slender attachment, which in structure resembled the palate. Sometimes, however, they do not resemble in structure the parts from which they grow. The instance just mentioned, of the pendulous portion of fat growing from the peritoneum, will serve as an instance: the vessels which had shot into it, made the tumour into fat, whilst the neck was of a fibrous and vascular structure. I have seen osseous tumours unconnected with bone or periosteum; and indeed, in general, the structure of a tumour is unlike that of the part in which it is produced. Therefore we seem warranted in concluding, that in many cases the nature of the tumour depends on its own actions and organization; and that, like the embryo, it merely receives nourishment from the surrounding parts.

"If, then, the coagulable part of the blood be from any cause effused, if the adjacent absorbents do not remove it, and the surrounding vessels grow into it, the origin of a tumour may be thus formed. It may be right to reflect a little on the causes which may occasion a deposition and consequent organization of the coagulable part of the blood; as such reflections throw light on the nature and growth of tumours, and lead to the establishment of principles, which are applicable to tumours in general. The deposition of the coagulable part of the blood may be the effect of accident, or of a common inflammatory process, or it may be the consequence of some diseased action of the surrounding vessels which may influence the organization and growth of the tumour.

"In the former cases, the parts surrounding the tumour may be considered simply as the sources from which it derives its nutriment,

ment, whilst it grows apparently by its own inherent powers, and its organization depends upon actions begun and existing in itself. If such a tumour be removed, the surrounding parts, being sound, soon heal, and a complete cure ensues. But if a tumour be removed, whose existence depended on the disease of the surrounding parts which are still left, and this disease be not altered by the stimulus of the operation, no benefit is obtained: these parts again produce a diseased substance, which has generally the appearance of fungus, and, in consequence of being irritated by the injury of the operation, the disease is in general increased by the means which were designed for its cure. It appears therefore that in some cases of tumours, the newly formed part alone requires removal, whilst in others the surrounding substance must be taken away, or a radical cure cannot be effected.

"There is yet another circumstance deserving attention, before I proceed to the particular consideration of the subject; which is, that a tumour once formed, seems to be a sufficient cause of its own continuance and increase. The irritation which it causes in the contiguous parts, is likely to keep up that increased action of vessels which is necessary to its supply; and the larger it becomes, the more does it stimulate, and of course contribute to its own increase."

These remarks lead our author to some reflections on the mode of cure in the early stage of tumour. These are by topical bleeding and cold applications. After the increased action is thus subdued, he proposes stimulant remedies to promote absorption. But if these tumours have really an economy of their own, we cannot easily conceive how application applied to the neighbouring parts can produce any lasting effect.

After these remarks, Mr. Abernethy enters on his division, and still confining the word to substances which made no part of the original structure of the body, he denominates the first genus from its firm and fleshy feel, *sarcoma* or *sarcomatous tumour*. This genus, he observes, contains many species. Those enumerated by our author are, *Common vascular or organized sarcoma*, *adipose sarcoma*, *pancreatic sarcoma*, *mastoid or mammary sarcoma*, *tuberculated sarcoma*, *medullary sarcoma* (sometimes called soft cancer), *carcinomatous sarcoma*. For the description of these we must refer our reader to the work, where he will find them illustrated with cases.

The next *genus* of tumours under the *order* of local diseases is *encysted tumours*. Though only one species is mentioned, yet it seems to comprehend so many varieties as might, we think, have authorised some divisions, if not into species, at least into varieties. Under the cases by which this genus is illustrated, we have the word *wen* more than once. We sincerely wish a precise meaning were given to the word, or that we were informed, that by the term is meant a tumour of any of the above description.

(To be continued.)

*An Account of the Discovery and Operation of a new Medicine for the Gout, Second Edition, with many Additions, and Testimonies of several Persons of the first Respectability.* By A. WELLES. 8vo. pp. 212. London, 1804.

It has been observed and acknowledged for two thousand years, that persons who have suffered repeated paroxysms of gout, *very rarely* become free from it during the remainder of their lives. This constitutes, in medical language, an *incurable* disease. There is no doubt that many persons, who have been attacked in the prime of life by this *sæva regina dolorum*, have, by means of regimen, remained free from any repetition of their sufferings for several years; and probably a large majority of such subjects might enjoy a similar exemption, if they possessed sufficient resolution to adhere strictly to the plan prescribed. The gout, however, notwithstanding the most rigid observance of regimen and temperance, will return at some time or other. These facts have been proved by sufficient time, observation, and experience. Another opinion, highly injurious to the advancement of medical science, has unfortunately sprung out of the former. It is, that the gout is not only incurable, but that every attempt to mitigate the sufferings of the patient is attended with great danger. This opinion has paralysed the faculty of medicine, and appropriated the profession for two hundred years at least. But the liberal, enlightened, and correct Heberden has given a testimony, which justifies his juniors in exerting themselves to seek after more successful means of mitigating at least the miserable torments of arthritic sufferers. The valuable communication from Dr. Adams, contained in this Number, p. 141, on the efficacy of bark in relieving gout; the extract of aconite and cicuta, the vapour bath, the antiphlogistic plan of applying leeches and cold to the parts affected, all which have appeared in previous Numbers of our Journal, prove that the possibility of safely mitigating the tortures of gout is established beyond controversy. The author of the pamphlet before us has introduced a *new* article into the *materia medica*, which, we believe, will be a valuable addition to it.

The exhibition and effects of this vegetable production have been witnessed by a considerable number of respectable medical practitioners, some of whom have used it in their own cases; and the testimonies of the noblemen and gentlemen who have received unequivocal relief from the use of it, can leave no doubt in our minds that the proposed remedy merits particular attention, both from the profession and the public at large. But here a question obtrudes itself, how far any respectable practitioner is justified in using or recommending a medicine, with the preparation and composition of which he is not familiar? All chemists know, that *vegetable* preparations cannot admit of any *analysis* which may lead to the slightest knowledge of their medicinal properties; and a chemical analysis of *mineral* preparations can do no more than discover



discover the ingredients; and we infer the virtues from the known analogy of similar preparations, which must be loose and unsatisfactory. The only rational means then by which the virtues of any proposed remedy can be investigated, are repeated and well observed trials of it in the human subject. Mr. W. has pursued this plan; and as far as three or four years experience can establish a medical fact, he has proved his medicine to be safe and efficacious.

*An Answer to Mr. Goldson; proving that Vaccination is a permanent Security against the Small-pox. By John Ring, Member of the Royal College of Surgeons in London. 8vo. pp. 43. London, 1804.*

It might be expected that Mr. Ring's vigilant zeal in the cause of vaccination would be roused by Mr. Goldson's pointed attack on the utility of the Jennerean discovery, of which we gave an ample detail in our last number. The subject is so extensively important, and the attention excited by Mr. Goldson's publication has been so considerable, that we think it necessary, without delay, to state the leading particulars of Mr. Ring's answer, and the objections which he urges against the validity of Mr. Goldson's statements. In this, as in the former case, we shall chiefly confine ourselves to a fair representation of the writer's arguments, and a few observations on their consistency, leaving our readers to make their own inferences from what is advanced. We may premise that Mr. Ring's defence of vaccination against Mr. Goldson's statements turns upon two points; either that the vaccination was insufficient, owing to faulty matter, and irregularity in the progress of the vesicle; or that the subsequent symptoms produced by small-pox infection, were only such as the introduction of this poison might at any time produce on certain constitutions, however indisputably they might previously have gone through the disorder.

Mr. R. first attempts entirely to vitiate the source of vaccine matter at Portsmouth. This, as we mentioned in our last Number, was sent by the Sick and Hurt Board to Mr. Rickman at Portsea. Of this Mr. R. observes,

"Mr. Goldson thinks it a sufficient proof of the Portsmouth matter having been good, that it was sent thither by a public board: but he has not proved that it was not procured from some place, where the golden rule of Dr. Jenner for taking matter was disregarded; and where matter was frequently taken at so late a period, as to produce spurious pustules, and bring disgrace on the practice.

"As Mr. Goldson has adduced no evidence that the matter was originally good, so he has offered none to prove that it did not remain on the lancets long enough to suffer injury before it was sent to Portsmouth. This was the more likely to happen, when it was taken in the worst mode possible, that is, on lancets; and had two offices to go through; at either of which these lancets

might have remained long enough to become rusty. Mr. Goldson himself justly observes, that the success of vaccination is easily defeated, either from the matter having been originally inefficacious, or from its being deteriorated, and suffering a decomposition by a variety of means.

“With the matter received from London, Mr. Rickman inoculated five marines; and, with matter taken from the arm of one of them, he inoculated Clarke, whose case was communicated to the Committee of the House of Commons. This man, it was said, afterwards had the small-pox; and it is therefore an object of the first importance to ascertain, as far as possible, whether he ever had the cow-pock.

“In order to form a proper judgment in this instance, it ought to be recollected, that the matter issued from a doubtful source; that it was not taken till the 11th day, by which time it has often lost much of its virtue, and is apt to produce a spurious pustule; and that the only witnesses of its effect were persons, who had not the least pretensions to any knowledge or experience in the practice. It is, therefore no wonder the House of Commons considered this case as of no weight, when placed in opposition to the strong evidence brought forward by Dr. Jenner. And again,

“Mr. Goldson tells us, that in the course of his experiments, Mr. Rickman soon found the matter run rapidly into a purulent state after the eighth day. No stronger proof can be given that it was not good. This was the source of the matter first used by Mr. Goldson, and other gentlemen in the neighbourhood of Portsmouth.”

In the usual progress of the vaccine vesicle, when no local injury happens to the arm, the contained fluid is at no time *purulent*, but, on the contrary, quite limpid to the last day that it can be obtained. This circumstance affords some ground of suspicion as to the efficacy of the matter originally employed; at the same time it is proper to state, that if Mr. Goldson's account be correct, vaccine inoculation from the same source, has produced, in numerous instances, the perfect disease, and has proved a complete prophylactic against repeated exposure to small-pox. Allowing the facts, the contradiction can only be explained by admitting the possibility of both perfect and imperfect vaccination from a vitiated source, under similar circumstances, and in each case with an entirely regular progress of the inoculated vesicle.

The case of Mr. Grant's child comes next under consideration. It was inoculated not with *Portsmouth matter*, but by Mr. Paytherus in London. No doubt is thrown on the genuineness of the matter here employed, and the perfect vaccination of the child. The eruption, which took place on the night between the sixth and seventh day, Mr. Ring attributes entirely to the cuticular inflammation produced by the variolous poison, and which, as Dr. Jenner has acutely remarked, is excited much more speedily in constitutions previously variolated or vaccinated, than where the poison

poison produces the true small pox ; and hence the rapidity of this inflammation is a pretty sure criterion of the constitution being secure from genuine variola. Mr. R. also points out, in the relation of this case, a small difference between Mr. Goldson's narration and that of Mr. Grant, the father of the child, in the time of the accession of the first symptoms of fever. On the evening of the seventh day the child was attacked with rigor and fever, and on the following morning a few eruptions appeared. On this Mr. R. remarks,

“ As to the rigor, it is a common effect of suppuration ; and the small pimples which appeared the next day were, in all probability, nothing but a miliary eruption. This eruption, it is well known, is the natural consequence of a hot regimen ; and, in the present instance, there was a hot regimen with a vengeance.

“ First, the child was rubbed before a good fire ; then recourse was had to flannel and warm Madeira ; and, lest any one stimulus should be wanting, an anodyne, as it is called, which commonly contains that powerful stimulus, opium, was administered by Mr. Goldson. With such an accumulation of heat, it is no wonder there were a few eruptions ; it is rather a wonder the child was not covered with eruptions from head to foot.

“ The small pimples which appeared, and caused such a terrible alarm, did not suppurate ; but, in three days time, were covered with a warty scurf, which was rubbed off the following evening. If this is the small-pox, it is a sort of small-pox never heard of till now.”

Mr. Ring proceeds to shew, by very satisfactory evidence, that the production of a local variolous pustule by inoculation after small-pox, occasionally of fever, and of a slight crop of pustules, is by no means an uncommon circumstance, and that the reason why we have had no more instances of such occurrences after variolous inoculation is, that the confidence in the efficacy of small-pox inoculation has been so complete, that few persons would give themselves the trouble of re-inoculation.

Having thus impeached the character of *Portsmouth matter* on the one hand, and shewn the possibility of mere cuticular inflammation by small-pox matter producing constitutional affection on the other, Mr. R. passes over the rest of Mr. Goldson's cases (which are all those inoculated by Mr. G. himself, and by Mr. Weymouth of Portsea) with very slight notice : either the vaccination was imperfect, or the subsequent disease was not genuine constitutional small-pox. One observation, however, requires some comment : in Mr. G's third case, the child, after supposed satisfactory vaccination, caught the small-pox, not by inoculation, but by casual contagion. Of course, cuticular inflammation is here out of the question, and Mr. R. therefore denies the genuineness of the vaccine inoculation. To prove it satisfactory, Mr. Goldson states, that two years afterwards the child slept with another child in small-pox for several days, wore the same night-cap,

cap, and, in short, was as much exposed to contagion as possible. On this Mr. Ring makes the following remark.

"It is too ridiculous to conclude, that, because a child did not catch the small-pox when she wore an infected night-cap, she could never catch it while she lived; and, unless gentlemen can bring better proofs than these of a temporary security arising from vaccination, they had better put on their own night-caps, and go to bed.

"The truth is, that it is no uncommon circumstance for a person to catch the small-pox who has resisted it before; and even resisted it for a long time, in every form, and every degree of exposure. Many a parent, after attending several children successively in the small-pox, and arriving at an advanced period of life, has at length fallen a victim to that disease."

There is nothing very *ridiculous* in the supposition, that a child who has once resisted such a degree of small-pox contagion should be ever after secure from the disease: no practitioner after such a test would hesitate in asserting the *high probability* of future security throughout life; and we appeal to Mr. Ring's candour, whether he would not have used this circumstance as a most powerful argument for the permanent efficacy of vaccination to any of his own patients, or to this very case, had not the event turned out so contrary to expectation. That we are not mistaken in this assertion, let us judge Mr. Ring from his own words. In his letter to Mr. Grant, here inserted, Mr. R. observes, "I have long since discontinued the practice," (of re-inoculating vaccinated patients with small-pox matter) "satisfied with exposing my patients, after vaccination, to the natural infection of the small-pox. This, which, on my assurance of safety, is submitted to with the utmost confidence, has removed all remaining doubt from the parents of the children vaccinated by me, who now amount to about two thousand five hundred. Many of these have been put into bed with persons labouring under the confluent small-pox, or wrapped up in sheets just taken off from the beds of variolous patients, with impunity." Will Mr. Ring, therefore, point out how many times of safe exposure to small-pox contagion is necessary to render the idea of permanent security probable, or where it ceases to be ridiculous? Nevertheless, we are far from supposing that this single case of Mr. Goldson's is to outweigh the strong evidence of the permanent efficacy of *perfect* vaccination; and we think the following testimonial one of the most valuable parts of Mr. Ring's pamphlet, because it is simple indisputable evidence:

"Three children of Mr. Henry Jenner, inoculated five years ago, have since been repeatedly inoculated with variolous matter, and exposed to the infection of the natural small-pox in its worst form, every year up to the present time, without catching the disease.

"Peard,

"Pead, vaccinated by Dr. Jenner more than six years, and Phipps, his first patient, vaccinated by him more than eight years ago, have been frequently put to the same tests with impunity. In the spring of the present year, they were inoculated for the small-pox with matter in the most active state; but they resisted infection.

"These patients were all vaccinated with matter from the human subject. Time, therefore, *has decided the question*, whether cow-pock matter degenerates in the human subject, and decided it against Mr. Goldson.

"Instances out of number might be adduced, if necessary, in support of this position. The cow-pock is transferred by the milkers, not only from one cow to another, but also from one farm to another; which could not be the case, if the matter lost its virtue after the first remove from the cow. One instance lately occurred, which furnishes an incontrovertible proof, that vaccine matter, whether generated in the cow or in the human subject, is the same. A woman lately applied to Dr. Jenner, who had the cow-pock when a child. She caught the disease by handling the rags which came-off from her sister's fingers. Dr. Jenner inoculated her for the small-pox; but she resisted the infection.

"I shall here insert two other cases; with which, as well as almost every thing else relative to the subject of vaccination, I have great reason to believe, both from the tenor of his pamphlet, and from intelligence I have received, Mr. Goldson and his friends are totally unacquainted. The first case, which was published by Dr. Barry, is as follows: A gardener, who lives with a gentleman of Dr. Barry's acquaintance, infected himself with the cow-pock, by rubbing himself against another person who had received the infection from the cow, from a conviction that it would preserve him against the small-pox. This happened several years ago. Since that time he has often voluntarily exposed himself to the infection of the small pox, and even lain in the same bed with his children, when they were covered with it, but never caught the disease.

"The other case was published by Mr. Creaser. It was communicated to him by Mr. White, of Landsdown Place, Bath. About twenty-three years ago, John Bright, a labouring man, whom Mr. White sometimes employs, lived at a farm. His fellow-servant, who had the cow-pock, communicated the distemper to him in a frolic, by means of a scratch on the hand. He has since been repeatedly inoculated for the small-pox. He has also had the disease in his family, and been exposed to it under its most malignant form, but still escaped infection."

A very pointed evidence from the Vaccine Institution of Edinburgh is also given in favour of the undiminishing power of vaccination through three, four, and even five years.

What then remains to be done by the advocates of vaccination? Mr. Ring, it will be seen by the following passage, is for standing aloof

aloof from all attempts by experiments at doing away the impression made on the public mind by Mr. Goldson's statement.

"Mr. Goldson solicits the Vaccine Institution to make fresh experiments, in order to decide a question which is long since decided. What institution he means may, like a considerable part of his observations, admit of a doubt. Whether there be any vaccine institution that will so far disgrace the cause, as to repeat such experiments at Mr. Goldson's request, and whether there be any vaccine institution that would not disgrace itself by such an act, I shall not presume to determine; but the Royal Jennerian Society have passed a resolution, that Mr. Goldson's pamphlet does not, at present, require any notice from them. I trust they will still adhere to that resolution:

*"Nec deus interit, nisi dignus vindice nodus.*

"It does not require a hundred able heads to plan, nor a hundred able hands to execute, the simple task of putting vaccine patients to the test. It is what any head, however weak, can plan, and any hand, however unskilful, can execute.

"But when we consider what a vast number of persons have been vaccinated in this metropolis, and are daily exposed to the danger of catching the small-pox in the natural way, we cannot but deem it a work of supererogation to try such experiments again if they are innocent, and a crime to try them again if they are attended with danger."

Probably the impression made by Mr. Goldson's cases will subside, and the appearance of contravening evidence will sooner or later be entirely lost in the daily accumulating mass of testimony in favour of vaccine inoculation pouring in from every quarter of the globe; but why should any of the friends of this practice hesitate immediately to institute those experiments which may speedily put an end to the controversy? Why should they think it a disgrace in such a cause, and with such reliance on success, to convince the doubtful, silence the malicious, give confidence to the anxious, and hasten the great object of all their endeavours, the annihilation of the small-pox from the face of the globe? Some consistency too should be preserved with regard to the alleged security of the proof-trial of subsequent variolous inoculation. It has been hitherto an argument of no small weight in the hands of the friends of vaccine inoculation, "it can at least do no harm; first give your child the benefit of the cow-pox and you may then safely try him with the small-pox inoculation, when you will be convinced by the result how perfect is the security which vaccination produces." But if, whilst a considerable part of the public is still averse, or but coldly disposed towards vaccination, the only palpable proof of its efficacy is wantonly held out as full of danger, and not lightly to be resorted to, how much will not such ill-judged zeal injure the cause it strives to serve! What is this mighty danger of variolous inoculation? Mr. Ring himself acknowledges to have performed it upon eleven hundred persons after vaccination without

without any untoward accident, and many more hundreds, or thousands of instances, equally innoxious, may be added to the list. Even the cuticular inflammation and consequent symptoms, though as severe as in Mr. Goldson's cases, produce no more than a day or two of indisposition, and an eruption of a few pimples. Mr. Ring will surely not magnify *these* into a disease of very great moment; and the only cases of danger which he brings are two from Buchan, which, however authentic, are little adverted to, on account of the extreme rarity of the occurrence.

The present pamphlet contains several other desultory remarks, for which we shall refer our readers to the original; and here we should close our account, if it were not incumbent upon us to repel an accusation which the Author has thought proper to bring against the manner in which we noticed Mr. Goldson's pamphlet in our last number. For this we must beg our reader's indulgence a short time longer.

We are first accused of inconsistency in exculpating the medical men of Portsmouth from the charge of indifference to professional improvement, at the same time that we urge the local advantages for scientific information of a situation so near to the metropolis, and so constantly communicating with it. The truth seems to be, that if Mr. G's dates are accurate, the profession at Portsmouth can neither claim the merit of early exertions in vaccination, nor yet are they liable to the reproach of culpable neglect. The accusation was trifling, and Mr. G's defence weak.

We are next charged with mistaking the object of Mr. Goldson's dedication. As Mr. G. himself has committed the mistake, (an unaccountable one we acknowledge) we cannot pretend to reconcile his contradictions; but though sent to Salisbury Square, we must still suppose that the author meant to dedicate his book to the Vaccine Pock Institution, for this obvious reason, that Mr. G. addressed his Remarks to some Institution expressly for Vaccination, which had existed long enough to be able to undertake those experiments of reinoculation that he recommends. Accordingly, this respectable Society has taken Mr. G's dedication to itself, and has actually pursued the subject by the sure path of experiment.

As we have no desire to spare ourselves any of Mr. Ring's abuse, we shall insert the following.

"The article in question is one of the many in modern times, which makes us regret that the review of books is a trade; that it is too often delegated to persons incompetent to the task, too often prostituted to the purposes of party, and too often made subservient to sordid gain. Such a practice cannot be reprobated too severely. On so important an occasion as this, no understrapper should be employed; no partial statement should be admitted; no puff, no misrepresentation, no compliment at the expence of truth, should be suffered to pass without animadversion."

It is our chief object in our monthly notice of new publications, to confine ourselves strictly to critical analysis, or rather, to state  
more

more or less succinctly the leading contents, with or without occasional remarks on the propriety, originality, consistency, and candour of what is advanced. We have no apprehension of being accused of wilful misrepresentation of matter of fact; and as we make a point of giving the several author's own words, more or less condensed, in the most important statements, there is little danger of much accidental error. Mr. Ring accuses us of admitting Mr. Goldson's statements rather too readily. Now, as all that we have inserted of Mr. G's facts is almost in his own words, and given simply as his own cases, does Mr. Ring mean to charge us with having done *too much justice* to Mr. G.? or, would this enemy of partial statements, have had us suppress a part, and falsify the remainder?

No small portion of the offence we have given to Mr. Ring (we believe) is included in the following accusation.

"But it is puerile to pretend, that a medical man is the more competent to put his cow-pock patients to the test, in consequence of his belonging to a Society. Any individual is qualified for that undertaking; and it is easy to collect witnesses of his proceedings in any town or village in the kingdom. There are several *individuals*, members of the Royal Jennerian Society, besides Dr. Jenner himself, whose practice has been far more considerable than that of the Vaccine Pock Institution, both in extent and duration. It is therefore an insult to deny, that they have it as much in their power to institute further experiments on the subject; as it is a mockery to affirm, that no party is so fit to decide the point, as that which furnished the matter, and of course is interested in the question."

Mr. Ring is not in all cases an enemy to misrepresentation, or he would not have made us express so very absurd an opinion, that a medical man is more competent to reinoculate his patients when belonging to a society than when standing singly on his own experience; or that any "individual member of the Royal Jennerian Society, whose practice has been far more considerable than that of the Vaccine Pock Institution," would not perform a most acceptable service to vaccination, by instituting farther experiments on his own patients; but we do maintain, that the Vaccine Pock Institution is particularly called upon in this case, if it furnished the *Portsmouth matter*, and if, from the duration of the Society, it is able to meet the call in a satisfactory manner. Had a similar imputation been thrown on Mr. Ring's matter, would he not have thought himself peculiarly interested in vindicating its genuineness? and though a professed enemy to puffing, would he not, at least on such an occasion, allow himself to state the extent and duration of his own practice, as additional motives for his exertions? Lastly, let Mr. Ring remember, that the pen which is truly *prostituted for the purposes of party*, is that which, without bringing forward the least shadow of evidence, stoops to personal defamation of his opponents, and throws out unequivocal insinuations of sordid and base



base motives of private gain acting in direct hostility to the efforts of philanthropy and public spirit. The accusation of sinister motives is easily made, and as easily retorted; but the best friends of the Jennerian discovery will the most lament that it is defended by such weapons.

## MEDICAL AND PHYSICAL INTELLIGENCE.

[ FOREIGN AND DOMESTIC. ]

### *Mr. Buchholz's new Method of preparing Emetic Tartar.*

Take of crystals of tartar, two pounds; glass of antimony, one pound and a half, let them be well pulverised, and mix them together. Then pour on the mixture a sufficient quantity of water to make a thick paste. Expose this mixture under a glass bell to the action of the solar rays for about a fortnight, during which time it must be agitated three or four times a day, and a little water added to replace that which evaporates, in order to keep the mass in the same consistency. The mass puffs up, and sulphurated hydrogen gas is disengaged. Flakes of an analogous colour to kermes are perceived, and the whole mass receives a red brown colour. At the end of a fortnight, it is dissolved and washed with boiling water, and afterwards filtrated. The insoluble residuum amounts to about three ounces. On evaporating the liquor, two pounds and fifteen ounces of emetic tartar in fine crystals will be obtained. From Mr. B's experiments with the residuum and the crystals of emetic tartar, he concluded,

1. That the glass of antimony may be dissolved by the acidulous tartrit of pot-ash in the state of a paste, and at a middle temperature.
2. That it is only necessary to repeat the crystallization, in order to deprive emetic tartar of iron, and of tartrit of lime.
3. That silica is not found in all glasses of antimony.
4. That under certain circumstances, particularly through the assistance of other saline substances, the tartrit of lime dissolves in great quantity, and even crystallizes regularly.
5. That one part of crystallized emetic tartar requires about fourteen parts of distilled water of 10—12° Reaumur for solution, and not eighty parts, as some chemists have imagined.
6. That 100 parts of boiling water are capable of dissolving 53 parts of emetic tartar, when entirely free from tartrit of iron and tartrit of lime.

**BILL**

# *BILL OF MORTALITY,*

For PORTSMOUTH, NEW HAMPSHIRE, for A. D. 1802.

By LYMAN SPALDING, M.B. &c.

| COMPLAINT.              | AGE.                                                                                                                             | Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | Total. |
|-------------------------|----------------------------------------------------------------------------------------------------------------------------------|------|------|------|------|-----|------|------|------|-------|------|------|------|--------|
| Aphtha                  | - - - - - 4, 4 weeks                                                                                                             | 1    |      |      |      |     |      |      | 1    | 2     | 1    | 1    |      | 2      |
| Apoplexy                | - - - - - 66, 33, 55, 43, 63 years                                                                                               |      |      | 1    |      |     |      | 1    |      |       |      |      |      | 5      |
| Atrophy                 | - - - - - 55, 69, 40, 55, 3m. 60 years                                                                                           |      |      | 1    |      |     |      |      |      | 1     |      | 3    |      | 6      |
| Cancer                  | - - - - - 55, 63, 60 years                                                                                                       |      |      |      |      |     |      |      |      |       | 1    | 2    |      | 3      |
| Cankerrash              | - - - - - 8, 2, 5, 7m. 2, 16, 23, 4 years                                                                                        |      |      |      |      |     |      | 1    | 6    | 2     |      | 1    | 6    | 8      |
| Cholera of Infants      | - - - - - 6 to 24 months                                                                                                         |      |      |      |      |     |      |      |      |       | 3    | 1    |      | 13     |
| Cholic bilious          | - - - - - 42 years                                                                                                               |      |      |      |      |     |      |      |      |       |      | 1    |      | 1      |
| Consumption             | { 14, 74, 53, 47, 53, 30, 69, 17, 33, 30, 60,<br>14, 33, 18, 69, 64, 60, 33, 28, 48, 52, 18,<br>29, 50, 63, 28, 22, 30 - - - - - | 2    | 2    | 4    | 3    | 7   |      | 1    | 3    |       | 2    | 2    |      | 28     |
| Debauchery              | - - - - - 55, 38 years                                                                                                           |      |      |      |      |     | 1    |      |      |       |      | 1    |      | 2      |
| Dropsy                  | - - - - - 69, 50, 84, 52, 89, 24 years                                                                                           |      | 1    |      | 1    |     |      |      |      | 2     |      |      | 1    | 6      |
| Dropsy in the brain     | - - - - - 3, 7, 8, 13 years                                                                                                      | 1    | 1    | 1    |      |     |      |      | 1    |       |      |      |      | 5      |
| Dysentery               | - - - - - 3, 2, 2 years                                                                                                          |      |      |      |      |     |      |      |      | 2     | 1    |      |      | 3      |
| Epilepsy                | - - - - - 64, 2, 2 years                                                                                                         |      |      |      |      |     |      |      |      | 1     | 2    |      |      | 3      |
| Fever and Ague          | - - - - - 33 years                                                                                                               |      |      |      |      |     |      |      |      |       | 1    |      |      | 1      |
| Fever bilious           | - - - - - 74, 30, 27 years                                                                                                       |      |      | 1    | 1    |     |      |      |      |       |      |      |      | 3      |
| Fever bilious malignant | { 44, 31, 41, 13, 35, 21, 30, 40,<br>30, 13 - - - - -                                                                            |      |      |      |      |     |      | 1    | 9    |       |      | 1    |      | 10     |

[illegible]

The town has been very unhealthful, some epidemic having raged the whole year. The hooping cough in January and February was very prevalent, and some sporadic cases continued till September. The measles made its appearance about the middle of March, and was very prevalent till July; at which time a bilious malignant fever made its appearance, and continued till August; when the cholera and cankerish commenced, and continued through the year.

Mr. SCHMIDT prepares ammoniated iron by dissolving muriat of ammonia in two ounces of water, and mixing with it one drachm of muriat of iron in a deliquescent state, which mixture is then evaporated to dryness.

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Mr. J. HEATH, of Grocer's Hall Court, has lately given an instance of a young gentleman in the last stage of typhus fever, being cured by the use of yeast.

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Dr. PATTERSON, of Londonderry, will speedily publish, **OBSERVATIONS** on the Climate of Ireland, and **RESEARCHES** concerning its Nature, from very early periods to the present Time. With **THOUGHTS** on some Branches of Rural Economy, particularly recommended in **AN ADDRESS** to the Inhabitants and Friends of this Country. To which are prefixed, **PRELIMINARY CONSIDERATIONS** on the Structure and Functions of Plants—on the Analogy between the Vegetable and Animal System—on the general State of Woods and Plantations, in Ireland, in ancient and modern Times—on peculiar circumstances denoting the various conditions of its Linen Manufacture throughout a series of ages—and on the Utility of a co-operation in works of Art and Science.

This is a *new* work; and is the *first* undertaken in Ireland, to give a connected and concordant view of subjects manifestly of primo importance to the nation. For what can be estimated more valuable to the people of this fertile and favoured isle, than an union of the principles of science with the rules of art, to raise the bounties of Nature to their highest possible degree of perfection, by a skilful and diligent culture of the necessities of life—those for food, raiment, and dwelling?

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CUVIER, the well known natural historian, has lately published a work on the species of animals that have been lost.

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COURET DE VILLENEUVE has lately published a botanical work at Paris, containing a description of all the plants that are cultivated in the garden of the Central Colloge at Ghent, arranged according to the Linnean system.

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#### TO CORRESPONDENTS.

Communications are received from Dr. Trotter, Dr. Rodinan, Mr. Edgar, Mr. Blake, and Candidus.

THE  
Medical and Physical Journal.

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VOL. XII.] SEPTEMBER 1, 1804. [NO. LXVII.

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Printed for R. PHILLIPS, by W. Thorne, Red Lion Court, Fleet Street, London.

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

THE little leisure I have had since my return from Madeira, has prevented my attending accurately even to the periodical publications of the day. But the name of JENNER, at the close of the first paper in your last Number, could not but arrest my attention, in a journey I am now making in quest of materials for a more correct account of morbid poisons.

Among the subjects which will form a part of my next edition, is one very much connected with Dr. Jenner's paper; and if I mistake not, the particular road of my enquiry has conducted me through some intricacies which have escaped the general practitioner. If Dr. Jenner has remarked them, his numerous engagements have prevented his dilating upon them, in a manner sufficiently explicit for those who have not followed that chain of reasoning which connects every nosological enquiry. It is indeed hardly possible, in the small space allotted to each writer in a production like yours, to offer any thing more than an accurate statement of facts; and perhaps you will charge me with obscurity in attempting to compress a complicated enquiry into so small a compass. However, as Dr. Jenner expresses an intention to publish more at large, I shall be glad to be confirmed or corrected by him.

When the constitution is engaged in any particular action, which produces local affection, any cause which at another time would produce an uniform effect, is more or less influenced by this state of the system. This is more remarkable in morbid poisons than in other diseases. The law of small-pox is to produce slough. Let a blister be applied in the early stage of the eruption, and if the disease is violent, a thin slough will be formed of the same

( No. 67. )

O

extent

extent as the vesication. If, whilst the constitution is under the influence of erysipelas, a venereal chancre is contracted, the whole prepuce or glans will be suffused with an erysipelatous efflorescence; and as the erysipelas either yields to art, or subsides of itself, the chancre acquires its true character.

This subject might be extended much further, but my only wish is to render myself intelligible. If then the constitution thus engaged, should alter the usual appearance excited by local stimuli, we should not wonder if, on some occasions, she should be altogether insensible to those stimuli which would affect her at other times. But a disease may continue so long as to be almost familiar with the constitution; that is, the local effects may remain after the constitutional action which formed them has subsided; or the constitutional action may be so weak as to be easily superseded by a new and more powerful stimulus. In this case the insertion of the vaccine, or any other morbid poison, will not only produce its genuine effect, but the constitution will be so engaged by it, that inflammation at a distance from the insertion, and excited by any previous cause, will now partake of this new action, and perhaps be altogether superceded by it; and if the new action is of such a nature as to subside after passing through a determined course, the patient will by these means be relieved of his inveterate disease whilst he is passing through the new one.

These considerations are of the utmost importance, because some of the honest but over sanguine friends of vaccination have too generally recommended the operation as a means of clearing the skin from other eruptions. It is with particular pleasure I see Dr. JENNER's cautions on the subject, and also *his* remark that the vaccine pustule or vesicle is not always imperfect or ineffectual during the influence of a malady which *he* describes; on the contrary, he observes, that it is sometimes perfectly correct, and much more frequently so when the first disease has been of long standing, than when in its recent state; and what is remarkable, the first disease is then sometimes entirely swept away." \*

There is a kind of itch to which the poorer people of Madeira are extremely liable, and which I shall hereafter describe more at large. When such a patient is inoculated with

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\* See the paper before alluded to.

with vaccine lymph, for the most part no local effect appears. I have repeated the inoculation in some subjects for three times with recent matter, but with as little success. In one of these, after she was cured of the first disease, I was astonished at the sight of a large number of vesicles in various parts of the body. This was not the only instance in which I had reason to believe, that though the local effect of vaccination might be superceded by other causes, yet when those causes ceased, a disposition to the disease, which was formed at the time of insertion, is now brought into action, and shows itself by a general eruption. I very much think that this occurrence is more general than is suspected, and that some of those eruptions which have appeared at a remote period after vaccination, and which the zealots on one side have called small-pox, and those on the other side chicken-pox, have been vaccine vesicles. I have already given cases of this, arising from a peculiar state of the atmosphere; and I cannot help wishing that we were all more attentive to mark phenomena, than hastily to get through difficulties.

The cow-pox stands so deservedly high in the estimation of all reasoning people, that its friends ought as much as possible to encourage the objections of the captious, in order to ascertain every variety, and reduce them to laws. The objections hitherto started are too light to be taken into account when compared with the contrary evidence. But they ought all to be circumstantially detailed, candidly examined, and carefully compared, so as to enable us to reduce these anomalous appearances, as they are called, to fixed laws. That this is possible I have no doubt, and while we are forming associations for diffusing this invaluable blessing, would it not be desirable to have a centre of communication to which every anomalous case should be referred. Let a medical committee be formed for this purpose. This appears to me the more necessary, because it has been too much the fashion, either publicly or privately, to address the discoverer of the invention on all these occasions. It is equally cruel and absurd to suppose him aware of every little variety that may occur in a practice, the value of which he had no sooner ascertained than he generously imparted it to the public. Is it thus we show our gratitude for the greatest improvement the art has ever received, by perpetually persecuting the generous inventor? If such a committee were formed, every fact would have its due importance affixed to it, and the public mind would not be continually harrassed by crude and contradictory

contradictory reports. This committee should be formed in the metropolis, and allowed to receive and send their letters and packets from all parts of the world, free of an expence, which I conceive at present must swallow up the whole interest of the pittance voted by the representatives of the richest nation in the world. But it becomes me to be cautious, lest I should touch on topics which may have already been discussed during my absence from England; I therefore leave the subject to the consideration of your better informed Correspondents.

Worcester,  
August 9, 1804.

I am, &c.

JOSEPH ADAMS.

CASE OF BRAINULAR AFFECTION FROM AN EXTERNAL CAUSE; *by* Dr. PATTERSON, of Londonderry.

MONDAY, Nov. 15th, 1802, near noon, I was called to visit Master W—M—, a strong healthy boy, aged four years; but previous to my introduction into the chamber where he lay, I received the following information from his mother. On the preceding Saturday, in the afternoon, she observed him playing with an iron stair-rod, which she permitted him to keep, and left him at his play with some others of her children, not having the most remote idea that any mischief could ensue from his handling that moveable. However, she had not long left the spot when he came to her with his nose bleeding, which she was told proceeded from the rod having accidentally ran up his left nostril, whence it was recently withdrawn. The rod is nearly cylindrical, and not more than the sixth part of an inch in diameter at the ends.

He did not complain of pain; neither was any point in the whole course of the nose, nor in the neighbouring parts, painful on pressure with the finger; but shortly after the mischance, he began to vomit, and was put to bed. Before I saw him, a purge or two of calomel had been given; a blistering plaster was applied to the back; and other corresponding measures were pursued, on the presumption, it seems, that the morbid appearances proceeded from worms.

I found him lying in rather a drowsy state, not qualified to make a direct or satisfactory answer, but seeming sensible when roused by importuning him with questions.

His



### *Dr. Patterson's Case of Brainular Affection.*

His eyes did not betray any irregularity in their motions, indistinctness of vision, nor diseased condition in the pupils. On being raised in the bed, he indicated a propensity to vomit, by small sharp regurgitating motions of the œsophagus; and when taking drink, he swallowed it in a hurried manner. His face, which was flushed, shewed a degree of turgescence; and, shortly before I saw him, some twitchings about the *alæ nasi* and lip were observed, then, however, scarcely discernible. His pulse, at the same time, was too unequal to be accurately numbered; but it communicated to the fingers a sense of considerable acceleration.

Considering the grounds upon which the previous treatment had been instituted, reflecting on the phenomena before my eyes, and never having met with a similar case, I found myself in a sort of dilemma; therefore I thought it most expedient to commence my proceedings with caution. Accordingly, I ordered frequent doses of citrated kali, diluting fluids, and cool air. In the evening, the drowsy and other symptoms continued; but the pulse became quite uniform, and so distinct that it could be accurately counted, by which it was found to be from 108 to 110 beats in a minute. Under these circumstances, I thought nothing requisite, during the night, except *vin. antim.* a few drops of which were directed to be given every second hour.

Next morning, a brainular affection became apparent, as indicated by increased stupor, more extensive twitchings, and very indistinct pulse; whilst the iris still retained tolerable sensibility, which it did not lose until an advanced stage of the malady. Convinced now that my original suspicions of the real nature of the case were well founded, I prescribed a blistering plaster to the head, leeches to the temples, laxatives, and enemas. The leeches and injections, with some minor expedients, were repeatedly employed; but the morbid phenomena hourly increased, until convulsions closed the scene about twelve o'clock on Wednesday night, concluding the space of four days and eight or ten hours from the occurrence of the accident.

Arguments and solicitations were used to obtain leave to make an anatomical examination, but in vain; a prejudice prevailed, whose influence, in this case, was particularly to be regretted, as I consider it a very rare casualty, not having met with a like instance in the course of my reading, nor even heard of any, except one, which

happened in England. That also took place in a child, and terminated fatally in a shorter time than the one here recorded; but of the attending appearances I could not get an account in the least satisfactory, nor was the case, I believe, communicated in any shape to the public.

From a contemplation of the above circumstances, it seems fair to infer, that the instrument penetrated the brain, and that it passed through the cerebral, and toward the orbital, plate of the ethmoid bone; for I cannot conceive upon what principle or analogy the symptoms and fatality could occur from a superficial injury done to the olfactory nerves, the recurrent portion of the nasal, and the sphæno-palatine twig, as they are distributed on the pituitary membrane of the nose. However, I would be glad to know, Are such injuries as this patient suffered medicable wounds, or are they past all Surgery?

July 7, 1804.

P.S. The enclosed drawing (*see the plate*) is the figure of a hand belonging to a child, about a week old, who was brought to me in 1795. As represented in the figure, the tops of the thumb and fingers were surmounted with knobs, of a gristly or cartilaginous nature; and the fingers, united at the points by one of these knobs, were also bound together with membranes. The knobs I cut off, and severed the fingers, both which were easily done, and followed by complete success. As the case appears rare, I request its insertion in your Journal, which will make it universally known.

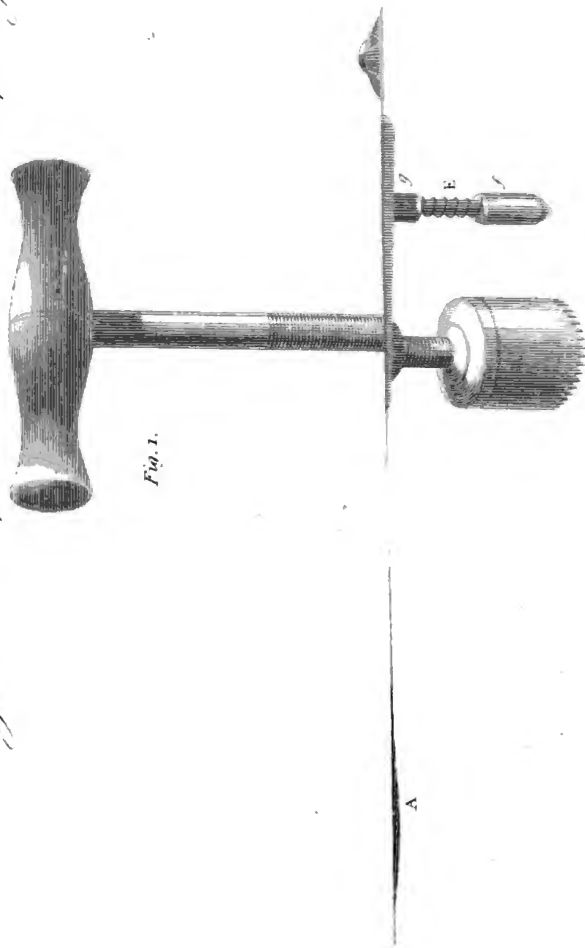
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### *To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

**I**N the course of my practice as a Surgeon in the Navy, I could not help observing the very defective form of many Surgical instruments used in the most important operations. Whatever therefore occurred to me as improvements in that way, I left a manuscript account of with Mr. Savigny, Surgeon's Instrument Maker, in London, which he undertook to get inserted in the Medical Journal there, as was accordingly done, in that periodical work for December 1802,

Since





Since that time it has frequently been observed to me, that the complicateness of the form of some of the improvements alluded to, not only makes them very expensive to the purchaser, but troublesome in the application. I have endeavoured, for this reason, to simplify those, which from such considerations may be thought the most exceptionable.

In the form I now offer them, they may not only be made much cheaper but more manageable, and, of course, more generally useful.

If what I have done will but afford a useful hint to others more capable of such improvements, I shall be satisfied; being rather apprehensive, that from my present state of health, I shall not be able, by future experience in surgery, to prosecute such improvements further.

I wish to avail myself of this opportunity, likewise, in correcting a few of the principal alterations and substitutions, that have been made without my knowledge in the aforesaid manuscript: such corrections being, in my opinion, absolutely necessary in some cases, to explain what I really had in view, as I am rather doubtful that the description you received will be scarcely, if at all, understood by the reader.

Presuming therefore that you will allow me that satisfaction, I begin, following the order in the Journal, with some prefatory observations I made on the management of Instruments in general.

1st. In No. 46, p. 482, for the twenty inferior lines of the second paragraph, instead of "to obviate, &c."—read as follows:

The observation, I confess, is too true, but may, I think, be easily accounted for. It is a rule with artificers to accustom their apprentices to the use of their tools, before they allow them to do any thing but what is conducive thereto; in that way they acquire a certain dexterity in the handling them, which they would not otherwise have; and even others, which they may have occasion at a future period to make use of, although they should be new and unknown to them before.

Were young surgeons equally industrious in accustoming themselves, in a similar way, to the use of their instruments, upon such different substances as their instruments are intended to operate upon, in place of dead bodies, which but a few can have an opportunity of, they

would not be so much at a loss in managing any thing new as they often are.

2. In place of "*The noblest of all professions*," an epithet particularly introduced in the alterations made.—If any epithet is thought necessary to advance the rank or merit of the profession, I have no objection to dignify it with the appellation of being one of *the most useful and necessary*.

3. Page 483, paragraph iii.—For, the thread of the screw upon the legs of the trevet should be coarse, in order to regulate its position or necessary variations *with more celerity*; read, the screw-thread upon the feet, to fit the trevet to its place *the sooner*, should be as coarse as possible.

4. Page 484, paragraph iii.—For, may answer the purpose of a levator, &c.—read, may answer the purpose of a levator with another shank, having a coarser screw upon it, and a suitable piece with a rotatory motion on the end of it, which, in the operation, should be placed under the depression; the handle of the instrument, in that case, being turned the opposite way from what it should be in making the perforation.

5. Page 486, paragraph iv. and line 5.—If he can there "introduce the instrument"—read, If he can there *thrust* in the instrument, or if the very decayed state of the tooth or stump does not forbid the application of it to that particular place.

6. Page 487, paragraph i.—last five lines wholly super-added.

7. Paragraph iii. line 1.—For *contracted*, read *extended*; line 6,—for *extended*, read *spread*.

8. Page 487. The following notice is given, immediately after the description of the instrument for extracting bones, pins, &c. in the œsophagus, viz. "The above instrument, with Mr. Cruikshank's admirable contrivance for extracting pieces of money, &c. and the sponge probang, arranged in a compact case, are at all times to be met with at Savigny's."

From the above notification, it may be inferred that the instrument I have recommended, will not answer the same purpose as Mr. Cruikshank's.

I would be glad to know what objection there can be against using of my instrument in extracting a piece of money, as well as any other substance that should not be forced down into the stomach. It will surely require less dexterity in spreading the cat-gut under a piece of money

to be extracted, than in catching it with a hook; and in withdrawing the instrument, it will more readily be brought up, therefore it must answer all the ends proposed by Mr. Cruikshanks, and consequently supersede its use.

The more readily to understand the meaning of the improvements now proposed, it is necessary to refer the reader, who is not acquainted with my former designs, to your Journal for December 1802.

In place of the trevet or triangular rest for suspending the saw, and preventing it, in the operation of the trepan, from slipping suddenly down upon the brain, a kind of machinery that must unavoidably require some time in adjusting it to the unequal surface of the head; the danger dreaded in that operation may as certainly be avoided, in a much more simple way, by a rectangular prop, one side of which is to form the foot and the other the handle. The foot to be pointed at the lower end, and to rest perpendicularly upon the cranium. The lever should be of the same length as the handle, and move upon it by a pivot near the angle.

It is not necessary that the screw upon the shanks of the trephine should be so very fine as in the former design; a coarser one, of about seventy or eighty threads to the inch, I dare say, will answer the end proposed very well.

The fineness of the screw upon the shanks, not only makes it very liable to be broken, but considerably enhances the price of the instrument.

In working the trephine upon the latter plan, the operator having previously made a small hole near the place to be perforated, to receive the pointed end of the foot, takes a firm hold, with his left hand, of the handle of the support and lever; and with his right hand, the handle of the trephine; the saw, in the course of the operation, is raised or depressed at any particular point, merely by the inclination of the prop and motion of the lever, through which the shank of the trephine is screwed.

The preference of the latter design to the former, must be very obvious; from the latter instrument being at once fitted to the place to be operated upon, requiring less time in its necessary variations during the operation, and by resting more firmly upon the bone than the former can upon the teguments, it will be wrought more steadily.

It has occurred to me, since writing the above, that the trephine may likewise be very aptly prevented from slipping suddenly down upon the brain, in the operation of the trepan, merely by its shank, either plain or with a screw

screw upon it, passing through a ball confined in a socket in the upper or horizontal portion of such a rectangular support as is now recommended in preference of the trevet, with a spring foot to it to rest upon the cranium, and wrought in the above manner.

The last method of guarding the trephine is not only very simple, but, I think, will be found the most manageable of any I have yet thought of.

No surgeon of experience, in wounds and contusions of the head, I presume, will object to the instrument resting upon the bone in this operation as is here proposed, knowing, that any material injury done the head, is occasioned by the violence or force with which the blow is given.—However, any surgeon disliking that method of steadying the instrument, may very easily fix a cushion to the foot of it, which he may rest either on the bone or teguments, as he thinks proper.

### *The Raspatory.*

Two trepanning saws of different sizes being all the variety required in general practice, the raspatory may be made to answer its end more readily in a much more simple and cheaper manner, than according to the design in your Journal for December, 1802.

In place of the adjusting slide, the blades may be made to slide on both sides of the shank, proportioning the distance between the centre-pin and blade, on one side, to the diameter of the largest saw; and the distance between the centre-pin and blade on the other side, to the diameter of the smallest saw, and the blade in use to be secured by a screw for that purpose,

Care should be taken in forming the blades of the raspatory, that they may not be made broader than necessary; for the fore and back part describing two different circles, in perforating a part of the circle, which, in some cases, the operator may wish to do, the back part of the blade will rub so much against the side of the perforation as to be checked in its progress.

Surgeons, who do not think proper to make use of the raspatory, according to its original intention, will find this instrument very suitable for removing any small portion of the cranium, or of any other bone, or where a narrow or small opening is required which cannot be made by the trephine. This instrument, by placing the centre-pin in two different places, will make such an opening as may be intended.

If



If this instrument can be so usefully employed, in place of one so very unfit for its purpose, it cannot well be considered as making many unnecessary additions to the instruments for the operation in question.

In any attempt to make the trepanning instruments as portable as possible, and to diminish their number, the different blades of the raspatory may be made to answer the purpose of that instrument by making them to slide perpendicularly in the circumference of the saw, and to project occasionally beyond the teeth, as far as the operator, for any of the particular purposes mentioned, may think proper.

### *Lenticular.*

I have been informed, that some very respectable surgeons now seldom, if ever, make use of the lenticular, completing the perforation at once with the saw.

How it is possible to complete the perforation with the saw, of a bone in some parts so very unequal in its thickness as the cranium, and furrowed so deeply in some places within by the blood-vessels of the dura mater, without cutting some of them, or otherwise materially injuring that membrane, which we know likewise adheres very fast to the internal surface of the bone, I cannot conceive.—Were the operator certain of the membrane being detached, by a collection of matter betwixt it and the skull, he might consider such an instrument, in completing the perforation unnecessary; but until some rule is laid down, by which we can be assured of the membrane being separated from the bone, the perforation cannot be completed by the saw, but at the risk of injuring the dura mater, or cutting some of its vessels.

I am, &c.

Dumfries,  
April 12, 1804.

W. JARDINE.

### EXPLANATION OF THE PLATE.

Fig. 1. A view of the trephine suspended by a rectangular prop instead of a trevet.

Fig. 2. A side view of the shanks of the trephine screwed through the ball in a socket.

E. the foot with a spring surrounding a spindle that passes easily through the top.—One end of the spring is fixed at *f.* and the other to the ring *g.*

Fig. 3. The raspatory—A. the blade fixed in the slide to form the largest circle—B. the slide for receiving the blade, to form the smallest circle.

P. S. Mr. Savigny, surely, could not have misunderstood me so much, when I gave him permission to publish the description

description of the instruments I left with him, as to think that he had permission from me to alter the manuscript as he thought proper. No, that was not my design; but as he was in doubt at first whether it would be best to publish an account of them in a pamphlet, or in the Medical Journal of London; I allowed him, in any manner he thought proper, that is, either in the Medical Journal of London, or in a pamphlet by itself.

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*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

THE following Case having lately occurred to me, I doubt not but it will be acceptable to the Naturalist, and the Profession in general; as such, I send it (with a drawing) for your approbation, and request its insertion in the Med. Journal.

I am, &c.

THOMAS EDGAR.

*Fakenham, Norfolk, June 14, 1804.*

MATHEW NOBES, of Stibbard, in this neighbourhood, a chimney-sweeper, two years and a half since, observed an excrescence about the size of, and in appearance like, a wart upon the inferior part of his scrotum; it was, to the best of his recollection, unattended with any humour or inflammation, nor was it preceded by any injury to that part. It continued increasing in size and hardness until it became a perfect horn, as represented in the Drawing. (*See plate.*) This elongation of the epidermis is composed of lamellæ disposed in a longitudinal direction.

From its inconvenient position, and the pain it gave him when in exercise, more especially so in climbing up a chimney, (for in either case he turned the point of the horn upwards) he applied to me for its removal. It was taken off on the 11th of May last; a tolerable bleeding followed, (which was stopped by compressure) the edges of the wound were retained in contact by three ligatures, and the wound was soon cicatrized. The testicle and its vaginal coat were unaffected.

The circumference of its base is two inches and a half; at its apex, three-quarters of an inch; and three inches  
and

and a half in length. He twice cut off a piece the size of that which is shewn in the Drawing, as detached from the horn.

Doctor Monro, during his Lectures, exhibits a straight horn, about four inches in length, taken from the forehead of a woman.

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*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

I Hasten to lay before you some Papers just arrived from Dublin. Individually, Members of the Medical Council of the Royal Jennerian Society, I think ye will feel highly gratified, as the contents of them are of more importance than a folio volume of speculative opinions. With respect to the lines relating to myself, I enclose them, in order to show how well founded were my alarms on the spreading abroad of the pernicious pamphlet

*Salisbury Square, 14, viij. 1804.*

J. W.

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To Dr. WALKER.

Resident Inoculator to the Royal Jennerian Society, London.

SIR,

The publication of Mr. Goldson's cases of small-pox subsequent to vaccination, having occasioned some uneasiness in the minds of several persons in this kingdom, I was induced to try its validity by an experiment, the result of which, I hope, will appear so satisfactory to you, (who have shown so much anxiety to promote public confidence in the efficacy of vaccination) that you will have the goodness to make it generally known in every way you may think proper.

I am, &c.

*Dublin, St. Andrew Street,  
August 10, 1804.*

J. CRICGHTON,  
Member of the Royal College of  
Surgeons in Ireland.

Having had for some years past the medical and surgical control of two great institutions, namely the Foundling Hospital and Dispensary for the Infant Poor and  
Vaccine

Vaccine Inoculation in Dublin, which have afforded me ample means of co-operating with others in distributing the benefit of vaccine inoculation throughout this city and kingdom, I feel anxious to contribute, as far as in my power, to restore to every person that confidence in the permanent efficacy of cow-pock inoculation, which truth must ever command, and which a late publication from Mr. Goldson, surgeon, at Portsea, has called in question. As the express object of Mr. Goldson's work is to shew that the vaccine inoculation, although found to be a preventive against the small-pox for two or three years, had, in certain cases, ceased to prove so at the end of that period, the following experiments were made to ascertain this important point.

On the 24th of July last, I made choice of fifteen healthy children, some of whom had been inoculated by me near four years, and all above three years ago, with vaccine infection, (the first used in this kingdom) every one of whom had the disease in the most perfect manner, as appears from the different records kept in the Foundling Hospital, and the distinct mark of vaccine inoculation on the arm of each child; and having procured a child with a great quantity of small-pox infection in its most active state, I committed them to the care of George Stewart, Esq. Surgeon-General, who, with the greatest attention, inserted the variolous matter (taken from the pustules of the small-pox child) into the arms of each of the fifteen children, and afterwards continued them in the same room with the sick child, where they have ever since remained, having constant communication with it in every way, and frequently in the same bed, &c.

On the third day, the punctures in the arms of every child inflamed, and continued to go on in most of them in the usual way of small-pox inoculation until the eighth day, when all gradually began to decline without producing either sickness or eruption; sufficiently evincing that cow-pock inoculation had proved a permanent protection to the constitution of every one of the foregoing children from the small-pox.

Conceiving that a business so highly interesting in its nature could not be conducted with too much precision and publicity, I have great pleasure in subjoining the names of the following respectable professional gentlemen, who were so good as to witness the progress, and who join  
with

with me in congratulating the public on the happy result of these experiments.

JOHN CRUMPTON, Esq. M. D. Member of the College of Physicians.

GEORGE RENNY, Esq.  
RALPH S. O'BREE, Esq. } Members of the Royal College  
ABR. COLLES, Esq. } of Surgeons in Ireland.

— WILSON, Esq. Surgeon, 3d Regiment of Dragoons.

— JONES, Esq. Assistant Surgeon, ditto.

— M'Nally, Esq. Surgeon, Armagh Militia.

We are much obliged to Dr. Walker for the valuable communication he has obtained, and think it will, as well as the following, materially tend to put an end to all further controversy. The table containing Mr. Cricghton's fifteen cases, detailed from day to day, is peculiarly satisfactory, and though too long for publication in our Journal, ought to be carefully kept in the archives of the society. The author, however, in his very short analysis ("On the third day the punctures, &c.") has conveyed the substance. We think there was peculiar propriety in Mr. Cricghton's calling upon another gentleman to inoculate; and the success of Mr. Stewart, surgeon general, in producing the effect [local] in every subject, shews the matter to have been active and well applied. EDIT.

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### *To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

DOUBTS having lately been expressed, that vaccine inoculation will not prevent small-pox for more than three years, I beg the insertion of the following cases in your useful Journal, as the first three of them shew that the preventive power of vaccine inoculation, at least, exceeds four years, and am persuaded ought to be considered as permanent.

|                     |                 |                                                                                            |
|---------------------|-----------------|--------------------------------------------------------------------------------------------|
| 1 Maria Fuller,     | aged 10 years   | } Inoculated with<br>Cow-Pock in<br>May, 1800.<br>ditto April, 1803.<br>ditto March, 1804. |
| 2 John Fuller,      | aged 8 years    |                                                                                            |
| 3 Edwin Fuller,     | aged 6 years    |                                                                                            |
| 4 William Fuller,   | aged 4 years,   |                                                                                            |
| 5 Sarah Ann Fuller, | aged 16 months, |                                                                                            |

The cow-pock in all run the usual regular course.

The parents wished the above children to be inoculated with variolous matter as a *test* of the efficacy of the first inoculation. Accordingly, this was done June 5, 1804.

The

June 9, evident marks of inflammation in the arms of all.

June 13, the inflammation on the arm of Sarah Anne gone; on those of Maria and Edwin subsiding, but the inoculated parts contained matter; two days later there only remained on each a dry scab. In John and William the inflammation on the arms was more considerable, and lasted some days longer: on the arm of John, very near to the part inoculated, two small pimples appeared, but no eruptions besides. William had two small pimples on the lower arm and one on the cheek, which remained out a few days, but never contained a fluid.

In Edwin and Ann there was no perceptible indisposition.

Maria, John, and William had some stiffness under the arm, and a slight degree of feverish heat on the seventh and eighth days after inoculation; John had the most, the inflammation at the part inoculated being the greatest. The above cases were shewn to several medical gentlemen, who all agreed that the prior cow-pox inoculation had effectually prevented small-pox.

Thomas Fuller, aged twelve years, a brother of the above children, had been inoculated with small-pox matter above ten years ago; and though he had then no eruption of pustules, was supposed to have had the disease; he had afterwards been repeatedly allowed to go near persons affected with confluent small-pox with impunity. He was again inoculated with small-pox matter at the particular request of his mother, at the same time and from the same source (*viz.* June 5, 1804) as the above children. He was seized with feverish symptoms on the sixth day, and had a copious eruption of small-pox pustules over the face and body on the eighth day, which run the usual course, and left several marks behind. This last case demonstrates that the variolous matter employed for inoculation, was sufficient to have produced small-pox in all, had not the previous vaccine inoculation prevented it. The slight febrile symptoms on the seventh and eighth days, which occurred in those who had had cow-pox, may, I conceive, fairly be attributed to local irritation.

I am, &c.

*Lewes, August 12, 1804.*

W. CROCHFORD.

To

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

**T**O the man of letters, philosopher, and philanthropist, a mine of pleasure must display itself, when he casts his eye over the wide field of medical discussion and research, which has been entered of late, with so much candour; where we find those branches of the profession, who have not been honoured with the distinguishing mark of M. D. daring to call in question, opinions advanced by the very fathers of medicine, the first rate physicians of their day. Your Journal is the medium through which much useful information has been given by the exertions of liberal and disinterested men; men who are not wrapped up in unchristian-like apathy, and who do not conceal their talents in a napkin, or throw cold water on a subject, meriting the warmest support of investigation from every man, whose heart throbs with benevolent desires.

If my endeavours may tend to ward off a weapon, which has been lately wielded, against a discovery inferior to none, in point of the blessings and advantages which must ultimately accrue from it, I shall be glad if you will find a place for the insertion of this paper.

There is a man in this neighbourhood, who has gained a livelihood by following the occupation of itinerant inoculator, and is distinguished with the epithet of Inoculating Doctor, who has variolated his thousands, *and tens of thousands!* In the course of his practice amongst the peasantry, he has frequently been disappointed in infecting many of his applicants, and was perfectly unable to account for his failures, until many of them talked of having formerly had the cow-pox. At length, the theme of the cow-pox so often rang in his ears, as to induce him to suppose, that there really was some truth in what he had heard so often asserted; namely, that those who had been infected with it, could never take the small-pox. After this information, when he met with persons he could not infect, he always asked if they had had the cow-pox; the answer being in the affirmative, he has declared his inability to give them the small-pox, and their security from it to have arisen from the cause already assigned. Yet some people, assenting to this fact, observe, when the matter is taken from the human subject, there is reason to suppose its properties are so changed, that it soon loses its original

( No. 67. )

P

effects,

effects, and may render the constitution again susceptible of the variolous infection, after preserving it for a few years, which some have said, since the publication of Mr. Goldson's pamphlet, appears to be the case. Such ideas from individuals who never made the laws of animal economy their study, are very excusable; but I cannot restrain my astonishment, when I find Mr. G. the first to broach and support this noxious doctrine, which has already rivetted many to their unfounded prejudices, and hermetically sealed every avenue to reason and conviction; such are the baneful effects of this pernicious pamphlet. Does not every one, whose knowledge is not extremely circumscribed, know, that specific poisons or contagions are invested with the peculiar power of assimilating or converting the humours of the body to their own particular properties; this is an incontrovertible fact, which daily experience teaches us, and which has been known for centuries; but the manner in which this change is effected, is one of the many hidden mysteries of Nature, which man, in his finite capacity, may never be able to comprehend; yet some are so sceptical as to doubt every thing they cannot understand; with such, it is hard to decide, whether pride or folly is most predominant. If the above proposition is doubted, I would ask, how does the rabies canina infect every animal that we know of, without losing one atom of its virulence? The lues venerea also proves the truth of the position in the human body. It has been fully proved, that the infection of the cow-pox has been reciprocally given and taken between the cow and the milker, that one milker has given it to another; yet, notwithstanding every possible variety and change, from subject to subject, its properties remain the same. Mr. G. observes, he wishes the business to be calmly and quietly discussed, without exciting controversy; or something to this effect. Can he suppose that the circulation of a pamphlet, freighted with such poisonous materials, and wafted through the world by the popular gale of prejudice and ignorance, should escape censure? or that people are to remain silent, and behold with an eye of apathy that which hath done irreparable injury to the cause of humanity? Let me ask, what were the motives which induced Mr. G. to publish his book? Had they proceeded from a truly benevolent source, why did he not wait patiently until the necessary enquiries were instituted, and answers had been received respecting what he terms failures of vaccination? then purity of motive could never have been doubted; it is easy to make



make professions, but it is from actions that correct opinions are to be deduced.

The late Dr. Brown, a naval surgeon of considerable repute, who had been practising some time at Portsmouth, informed me that he was called to witness a *Portsmouth failure* of the cow-pox, wherein subsequent inoculation with variolous matter had produced the disease. You may guess what was his surprize, when he, in company with others of the profession, saw the child; he enquired where the eruption was? (the child's arm being denuded) but lo! it had fled; he was answered it was very visible yesterday. How the tide of their unnatural joy must soon have ebbed! But I beg you to observe, that this is *une maladie nouvelle*, which may aptly be termed the *Portsmouth variola ephemera*. Dr. Brown's reasoning on the subject did credit to him, and the truth of his opinion has been confirmed and experienced by Mr. Ring. He said it was easy to conceive, that virulent matter introduced into the system, might produce local inflammation, and even constitutional derangement, yet it was evident that the asseverations of the gentlemen were not substantiated; for nothing like the small-pox was the result of the subsequent inoculation. Mr. G. states, that he infected patients with the variolous matter taken from those who had been previously vaccinated; I mention this circumstance on the supposition that the vaccine matter previously employed had been genuine, which it certainly was not: I say, let him avail himself of this, his favorite and *mighty* argument, and observe how weak and futile it will appear. Does not every one know that nurses and mothers, who suckle their children that are ill of the small-pox, frequently have an eruption of pox on their breasts, when they themselves have formerly had the complaint? and can it be doubted, whether matter from this source will produce the idiopathic disease? Then, from parity of reasoning, matter introduced into the arm after vaccination, may be employed for a similar purpose, and will exert its accustomed influence over the body, which is not prepared to resist it, by means of the vaccine antidote, that will

For ages, on the wings of love, be born,  
To bless the rich, the wretched, and forlorn;  
Whilst millions shall to JENNER raise,  
Throughout the world, a monument of praise.

I have many proofs in my own possession of the prophylactic powers of the vaccine virus; but it is not necessary to make further mention of proofs, which for years

have been teeming on the public in accumulated numbers, or to take up any more of your Journal, which will be better employed in prosecuting medical research, in matters that have not been proved with that precision and certainty which the subject of this paper will appear to have been, to any, save the sceptic, whose perverted reason only views objects for the sake of inverting them.

I am, &c.

*Romsey, Hants, Aug. 6, 1804.*

RALPH CUMING.

## LETTER II.

### OF QUACKS AND EMPIRICISM.

#### CHARACTERS II. AND III.

DR. GRIFFENBERG. DR. MAYERSBACH.

SO wonderfully constructed is the human frame, so complicated are the diseases to which it is liable, as to demand the most intense study to acquire the knowledge of one, and long and deep experience to prevent the other. The most sagacious professor of medicine is sensible how inadequate are often his utmost exertions to discover, and consequently to remove, the causes of disease and death. He laudably avails himself of every phænomenon, of symptom, of habit, of weather, of age, of secretions and excretions, and by a scientific combination, is often happy enough to ascertain not only cause and effect, but the remedies which they indicate. Among other means, he will avail himself of the state of the urine, by which much may be suggested in febrile, hepatic, and many other diseases; but, upon this alone, his previous knowledge would not suffer him to depend, if he possess any regard for the welfare of his patient. If, therefore, the best informed physicians find this excretion inadequate to successful practice, it must prove so in a greater and more serious degree with the ignorant impostor; but to such indeed, who confine their practice to the exhibition of one or two nostrums for every disease of the human constitution, it is the same thing, whether they inspect the urine or the spittle, for the inspection is a mere pretence, in order to deceive the ignorant and impose upon credulity. The practice, however, has been sanctioned by antiquity, and

and even by persons, whose general information should have shielded them from the arts of imposition. If I mistake not, even the great Burleigh was a dupe to this species of imposition; but this is less surprising than that, at the present day, Lord Chief Baron Macdonald should sanction by his name the Quack Bill for curing worms! This will be the subject of a future letter.

Although the country people have long been deceived by water casters, as they are denominated, their artifices have not for many years produced any general impression upon the citizens of the metropolis till recently, that is, about the year 1772, when Griffenberg, a German Physician, made his appearance in this city; but, although he was a scholar, if not an able physician, he made little progress in delusion, and consequently his poverty made him an easier prey to the vicious propensities of the depraved Lord Baltimore, who bribed him and his wife to act as his pimps, in the attempt to seduce Miss Woodcock. The facts which the trial disclosed ruined the Griffenberg's, although the depraved nobleman escaped the punishment he merited. Miss Woodcock was a virtuous young woman, and lived many years very happily in Bishopsgate-street with Mr. Davis, to whom she was married, and where I have occasionally visited them.

The unfortunate Dr. Griffenberg was a scholar. Whenever I met him, he always addressed me in the Latin language, which was more familiar to him than the English. The very man who hastened his ruin neglected him, and he lived in great distress, and died penniless, which induced me, from compassion, to be at the expence of his funeral.

From his ashes rose a phoenix of great celebrity, Dr. Mayersbach, near Schweinfurth, in Germany. He came to London in November, 1773; and, from his subsequent success, he must have possessed strong radical powers. Every other scheme that was suggested to his inventive mind having failed, he offered himself to Angelo, who then kept a riding school, but was not accepted, as his diminutive size rendered him unsuitable for an equestrian postmaster. About this period (1773,) he became acquainted, by an introductory letter from Mr. Bresener, his brother-in-law, with his countryman, Dr. Griffenberg, before his reputation was totally blasted by his voluptuous services to Lord Baltimore; and it was agreed between them, that Griffenberg should initiate Mayersbach into his urinary deceptions, for which a share of the profits should be

given to the tutor, and which the great success of the pupil was enabled amply to confer; but which was probably withdrawn when Mayersbach became himself a professed adept; at least, so I was informed by Griffenberg and his wife: part of the engagement, indeed, extended to the latter, provided she should survive her husband, which really happened. The agreement, so far as it respected the widow, is literally translated from the original:

“Whereas, Dr. J. T. Griffenberg has, with extraordinary kindness, shewn me the secrets of his profession, and thereby put me in a situation to earn my bread as a doctor, and to succeed in his practice, if I should survive him; I shall ever consider myself bound by duty and gratitude to respect the said Dr. Griffenberg as my parent, and always most punctually to fulfil his will. I swear before Almighty God, by my soul and salvation, that if, in the providence of the Most High, I should survive the said Dr. Griffenberg, that I will always respect his widow; and, as a testimony of my gratitude, give unto her, during her life, six shillings a week out of my earnings; in confirmation of which, I hereunto subscribe my name,

“THEODOR VAN MAYERS  
“OF MAYERSBACH.”

“London, Nov. 1773.

At the time that Dr. Mayersbach first came under the tuition of Dr. Griffenberg, he did not know one article of medicine, nor the treatment of one disease, when he published the following quack bill:

“Doctor Van Mayersbach is arrived from Prague, and intends to remain here some time; he begs leave to recommend himself to the respectable public, to be honoured with their confidence, by which he will prove that he understands the use of medicine, and cures all inward and outward diseases.

“He tells every person, by his uncommon knowledge of urine, not only their diseases, but likewise how to cure them.”

The two first patients he had were, one with the itch, and the other with a cough; and he was obliged to place them in another room, till he could receive a message from his master how to proceed. It would have hence been a remuneration which gratitude demanded, independently of written documents, to have relieved the widow; which, however, he absolutely refused, at a time when it was said that his income was at least five thousand pounds a year.

Let

Let it, however, be recorded to Dr. Mayersbach's honour, that in 1773, when he lived in Rupert-street, Goodman's Fields, his wife, after a tedious illness, which proved fatal, had been attended by Johan Toennius, apothecary in Mansell-street; and, on application to Mayersbach in 1776, he faithfully discharged the expence of attendance which her illness had occasioned.

As Mayersbach was totally ignorant of medicines, certain pills, powders, and drops, with directions to give them, under certain circumstances, were sent to him; and these he administered discretionally. As he got a little more fledged, he attempted a loftier flight, and even ventured to handle edged tools; but, in consequence of their indiscriminate use, many serious effects succeeded, which were formally communicated to a board of the Royal College of Physicians, when it was archly observed by one of the board, that the charges merited investigation in the criminal courts of law; and thus the business ended with a laugh at the gentleman who presented these charges, for his ignorance in imagining that the College of Physicians ever did a wise act; or, in any instance, ever promoted medical science.

Mayersbach's reputation continued for some months in the most elevated degree. As a water doctor in the metropolis must be supposed to know more than the water doctors in the country, the devotees to deception flocked to town, or sent up their vials by the stages, and the urinary traffic of the country was transferred to London; and thus the German impostor, who, a few months before could not cure the itch, monopolized the most lucrative professional business in Europe. Among his patients he could claim a Harrington, a Hawke, and even a Garrick.

There was, however, a physician in London hardy enough to attack this popular empiric; and, by his spirited exertions, the delusion was so effectually removed, as to induce the impostor to quit London, and revisit his native continent. In less than twelve months he returned, and was again as much followed as previously to his emigration. The physician who had taken so active a part against the empiric, was dissatisfied with the conduct of the College; he was likewise insulted by a numerous herd of anonymous writers in the public prints; and having become an object of their envy, he avoided further interference; and, with the death of Mayersbach, this species of deception has, in a great measure, lost its influence in London, and new modes of deception have been practised

by a new race of German empirics; at the head of which may be placed Dr. Lamert, and his celebrated pupil Dr. Brodum, who will be introduced into the valuable pages of your Journal, in the subsequent letter.

In reflecting upon the various transitions experienced by Dr. Mayersbach in his professional character, it is remarkable enough, that several popular characters, after having suddenly lost their reputation, or, from the caprice of fashion, lost their professional employment, have retired a few months; returned after a period of absence to the metropolis, and regained their former practice. Sir Richard Jebb told me, and he had the information from Sir Edward Wilmot, Bart. himself, that two ladies of fashion, near the Court, died under his care (Sir Edward's) at the same period, which was so buzzed about amongst the circles of fashion, as to turn the tide so adversely against him, which had long and deservedly flowed in favour of Sir Edward, that from three thousand pounds a year, his professional income sunk to three hundred. This induced him to take a tour on the continent, from which he returned the next year, and as suddenly regained his former professional employment. This respectable physician retired into Dorsetshire in an advanced age, and died a few years ago, æt. 93. A little before this time, I had a letter from him, written in a good hand, and with great perspicuity; and which is now in the possession of

London, July 23, 1804.

IETROS.

### *To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

THE *liberal* discussion of a doubtful subject is the only probable mode of elucidating it; but how vague is the phrase, *liberal* discussion! Dr. Blegborough has given the public, in Number 65, an example of what he conceives to be a *liberal* discussion of the cooling treatment of gout, and promises renewed performances of similar *liberality*, if necessary. The observations which occur to me, as applicable to the subject, shall certainly not be *illiberal*, though they should chance to be inapposite or inconclusive.

Dr. B. sets off with an utter condemnation of a doctrine of gout, which indeed must be allowed to be as bold as novel; but it does not appear to me that either its boldness or its novelty involves its rejection without argument. It may, *as predicted*, possibly meet with *general opposition*; its originality invites it, but that general opposition will recoil on the opponents, if it should be founded on mere assertion, wholly unsupported by argument. It is not enough to aver that a doctrine is not tenable because it is at variance with popular opinion, it is requisite to impugn the principle upon which it rests, to brave its untenableness.

Not an opinion in physiology, however sanctioned, can be proof against unqualified attacks; nor is there one, however disputable, that ought to give way to so very sweeping an assault as that which Dr. B. has, in his own opinion, *liberally* opposed to the topical use of cold water in gout.

It is affirmed, that the gout is of local and not of constitutional origin; that the ligamentous and tendinous structure is necessary to its formal character, and that an inflammatory excitement of that particular structure is the painful source of the afflicting sympathies, which range more or less transiently throughout the system; it is also said that the proximate cause of all this grievance is excessive temperature, generated and evolved in the part affected by the agency of remote causes, according to the native laws by which heat is generated in every fibre of the animal economy.\* All this, it must be confessed, is new, not unpalatable, and has a very generalizing tendency respecting inflammatory affection; though it does not, as Dr. B. insinuates, reject the idea of specific inflammation; on the contrary, it founds the characteristic features of gout on the disease of a *peculiar fabric*; in that respect therefore it is specific, or *sui generis*, as Dr. B. will have it; but its specific nature is structural only, and not *material*, like syphilitic and cancerous virus, as he would wish to establish. A vast difference subsists between the simple excitement resulting from excessive heat, and that which arises from the virulent combination of animalized fluids: in the one case common irritation only prevails; in the other, complicated and durable disease; yet both are specific, but not similarly so, nor equally morbid. So much for a brief abstract and defence of the theory which espouses the

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\* See Remarks on Gout, by Dr. Kinglake, in the Medical and Physical Journal, No. LXI. pp. 241—246.

the practice of keeping inflamed gout in a state of reduced temperature.

What does the practice itself report? It affirms, (and that not only on the personal experience of the author of this view of the nature and treatment of the disease, but also on that of numerous correspondents) that it has in various instances proved rapidly and safely curative. Not one case has been offered to the public, excepting that by "A Constant Reader," of its deleterious effects; and that *solitary one*, unfortunately for the general disposition to oppose the practice, has been admitted to be wholly unfounded.

Dr. B. certainly refines on the gross humoral notion of gout, when he talks of "nervous irritability" and "obstruction;" but does he illustrate the nature and cause of the disease by these elaborate and inexplicable suppositions? He rejects the notion of morbid matter, and substitutes that of *specific laxity*; but how this specific laxity contrives to travel about the system, and occasionally, as if by intelligent predilection, to occupy particular stations, the Doctor does not so precisely specify; nor does he explain how this *itinerant laxity* suddenly braces itself up, and marches on to a new position. Surely, all this is *obscurum per obscurius*; nor is it conceivable how the Doctor, imagining gouty diathesis to be *specific laxity*, could, with common consistency, have stumbled on steam for its remedy. An application, unquestionably, as well adapted to soften rigidity, as to increase laxity.

The Doctor also speaks of "accumulated susceptibility," of "the left handed" erysipelatous inflammation, and of old people being insusceptible of excessive heat.

This is theoretic declamation only, and in no respect practically applicable. An unexcited heat does not amass excitability; on the contrary, it verges on inaction and consequent death, for want of excitement. Erysipelatous inflammation accurately denotes, by its greater or less violence, the exciting state of the constitution in which it occurs; but it is invariably an inflammatory affection characterized by excessive heat, and most directly curable by its due diminution; nothing sinister or "left-handed," as he, Dr. B. terms it, arises from this description of treatment; its salutary effect is uniform, definite, and in general complete. The thermometer, and what is more accurate, the natural sense of feeling, will discover a degree of heat in advanced age fully equal to what could occur in the utmost vigour of youth in similar morbid affections;



fections; nay, the excess is often so great in old subjects, as actually to decompose organic structure by its combusive force.

Dr. B. is wedded to a preconceived opinion of the nature of gout, which it may be feared will unconsciously disqualify him for *liberally* discussing a doctrine that so directly militates against that which he has espoused. But the public, on the present occasion, is the jury; the merit of the refrigerant treatment of gout will be arraigned at that tribunal, by the evidence of facts *alone*, which will preclude all adverse surmises, and leave the issue to the unsophisticated claims of impartial justice.

Adhuc sub judice lis est.

St. James's Street, July 12, 1804.

CANDIDUS.

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

PERMIT me to observe on Mr. Ring's Paper on Diarrhœa and Cholera Morbus, (p. 102,) that he seems to be unacquainted with the last alterations in the Pharmacopœia Londinensis. The *mistura cretacea* of the present Dispensatory differs from the *mistura e cretâ* of the first edition as well as from the *julepum e cretâ* of the old Dispensatory.

In the *julepum e cretâ*, *two drachms* of gum arabic were directed for a quart of mixture; in the *mistura e cretâ* *two ounces*; now, the name is changed to *mistura cretacea* and a quart of it is to contain *one ounce* of gum arabic. This quantity of gum does not make the mixture too thick; and as the gum is a very useful auxiliary, the alteration is much to be commended.

The plan of treatment which Mr. Ring recommends is not novel, but indisputably useful and practical; and I am persuaded that similar communications on prevailing diseases would be well received by the readers of your Journal.

A very great mortality has lately prevailed among leeches. In the course of three days I lost upwards of twenty; and had my stock amounted to twenty score, I believe they would all in like manner have perished. Another gentleman, I am told, lost one hundred and fifty in a very short space of time, and others have been equally  
unfortunate.

unfortunate. Though leeches are of very extensive utility in practice, their extravagant price\* places them beyond the reach of many patients, and few apothecaries can afford to lose so much money as is incurred by such sudden and numerous deaths; any kind of information therefore which your Correspondents can give upon the best mode of preserving leeches, will be very acceptable to one part at least of the medical world.

Those which I lost were apparently in very good health not a week before they died. They were kept in a sufficiently capacious glass vessel, and were supplied with (Thames) water every day. Almost at once they all sunk to the bottom of the vessel, contracted themselves, and scarcely moving for several hours at last died. Nothing more was particularly observable, except that hard knots or irregular contractions were to be felt in different parts of them.

It ought to be mentioned, that the Thames water has lately been so extremely filthy and offensive to the sight, the smell, and the taste, as to be hardly bearable; but as a similar mortality among leeches occurred during the winter months, when the water was free from such disgusting foulness, I can hardly believe that this could be the cause.

S. M.

August 6, 1804.

### Botanical Description of British Plants.

( Continued from our last, pp. 124—136. )

19. CHIRONIA. *C. centaurium*. *Centaurium*. *Gentiana centaurium*.

*Ang.* Centory. Lesser centory, or centaury.

*Gen. Desc.* Bloss. funnel-shaped, pistil leaning; stam. fixed to the top of the tube of the blossom; anthers becoming spiral; seed vessel two-celled.

*Spec. Desc.* Herbaceous, ten or twelve inches high, upright. *Leaves* spear-shaped. *Cal.* shorter than the tube, adhering to it, and that to the germen. *Flowers* a corymbus;

\* In February and March last they could not be purchased in Covent Garden Market for less than 3s. 6d. a piece; at present they fetch eight or nine shillings a dozen. Less than twelve years ago the writer of this paper bought them for 2s. 6d. and 3s. a hundred.

bus. Blossom funnel-shaped; tube long, yellowish; border reddish, segments lapping over each other. Anthers twisted spirally after discharging the pollen. Style cylindrical, cloven at the top. Summits two, horse-shoe shape, yellowish green. Barren pastures, woods. Bloss. June, August.

Use. Centory is justly esteemed to be the most efficacious bitter of all the medicinal plants indigenous to this country. It has been recommended as a substitute for gentian, and by some thought to be a more useful medicine; experience proves it to possess an equal degree of antiseptic power, and to it may therefore be ascribed all the medical effects of the other, viz. as a bitter tonic and stomachic, and also anthelmintic, antiseptic, emmenagogue, antiarthritic, and febrifuge. Many dyspeptic complaints are more effectually relieved by bitters than by Peruvian bark, which has now superseded the use of this and other bitters formerly common in febrile disorders; too generally perhaps, for cases of fever occur which are found to be aggravated by cinchona, yet readily yield to simple bitters. The tops, which are directed for use by the colleges, are most commonly given in infusion; but they may be taken in powder, or prepared into an extract.—Woodville. A tincture of the leaves, and the upper part of the root, is a good medicine in weak stomachs and cachectic habits. This plant is the basis of the famous Portland powder, which, taken in a large quantity, and for a long time together, prevents a fit of the gout, but brings on a hardness of the liver, palsy, and apoplexy. A decoction of the whole plant destroys lice, and cures the itch.—Withering.

20. RHAMNUS. *R. catharticus*. *R. solutivus*. *Spina cervina*.

Ang. Buckthorn. Purging buckthorn.

Gen. Desc. Cal. tubular; scales protecting the stamens. Bloss. O. Fruit, a drupa.

Spec. Desc. Stem upright, thorns terminating. Leaves egg-shaped. Flowers four-cleft, male and female, on different plants. Blossom pale green. Stamens 4. Summit four-cleft. Berry four-seeded, black. Woods, hedges, brook-sides. Bloss. April, May.

Use. The berries contain a pulpy deep-green juice, which has a bitterish, acrid, nauseous taste; they operate as a brisk cathartic, but their purgative effects are constantly accompanied by considerable thirst, with a dryness of the mouth and throat, and frequently with severe griping

gripings of the bowels, especially unless some diluting liquor be drank immediately after taking them. The dose is said to be 20 fresh berries in substance; twice or thrice that number in decoction; one, or one and a half drachm of the dried berries; one ounce of the expressed juice, or half an ounce of the rob or extract prepared by inspissating the juice. The inner bark is said to be a strong cathartic and to excite vomiting.—*Woodville*. A purgative syrup prepared from the berries is kept in the shops, of which about an ounce is a moderate dose (2 oz. *Lightfoot*), but on account of the sickness and griping occasioned by it, is falling into disuse.—*Withering*. The flesh of those birds which feed upon these berries is reported to be purgative.—*Homberg. Mem de l'Ac. des Sc.* The juice of the unripe berries is of the colour of saffron, and is used for staining maps or paper: these are sold under the name of French berries. That of the ripe berries, mixed with alum, is the sap green of the painters: but if they be gathered late in Autumn their juice becomes purple, and is thus also used for a dye. The bark affords a beautiful yellow dye.—*Lin. With.* Horses, sheep, and goats eat it; cows refuse it.

21. RHAMNUS. *R. frangula. Alnus nigra baccifera.*

*Ang.* Black alder, black berry-bearing alder; alder buckthorn.

*Gen. Desc.* As above.

*Spec. Desc.* Without thorns. Flowers hermaphr. one pistil. Leaves very entire. Bloss. five-cleft. Summit notched. Berry four-seeds, sometimes two. Inner bark, yellow; outer, sea-green; middle, blood red. Woods, wet hedges. Bloss. April, May.

*Use.* The inner bark, from a quarter to half an ounce, boiled in small beer, is a sharp purge. In dropsies, or constipations of the bowels of cattle, it is a very certain purgative. The berries gathered before they are ripe, dye wool of a green colour. The bark dies yellow, and, with preparations of iron, black. The wood of this shrub is preferred for charcoal used in the manufacture of gunpowder. The flowers are particularly grateful to bees. Goats devour the leaves voraciously, and sheep will eat them.—*Withering*.

22. EUONYMUS. *E. europæus.*

*Ang.* Spindle-tree, Prickwood. Prick timber. Gateridge-tree. Louse berry.

*Gen. Desc.* Bloss. five-pet. caps. coloured, five-sided, five-celled, five-valved. Seed coat hollow; seed veiled.

*Spec.*

*Spec. Desc.* Flowers mostly four cleft, greenish white. Filaments fixed in holes in the receptacle. Fruit angular, purplish red, sometimes white. Fruit stalks from the bosom of the leaves, with one or two pairs of flowers. Leaves sitting, egg-spear-shaped, opposite. Woods, hedges. Bloss. May, June.

In Cornwall it has four stamens.—*Mr. Stackhouse.*

*Use.* The berries act violently as an *emetic* and *cathartic*. They are *fatal to sheep*. Powdered and sprinkled upon the hair, they destroy lice. The wood, if cut when the plant is in blossom, is tough; and not easily broken; it is used by watchmakers for cleaning watches; and is made into skewers and tooth-picks. Cows are so fond of the shoots in spring, as constantly to break down the ditches of the fields wherever a plant of it stands. Goats and sheep eat it; horses refuse it.—*Withering.*

23. VIOLA. *V. odorata.*

*Ang.* Violet. Sweet violet.

*Gen. Desc.* Cal. five-leaved, adhering to the blossom above the base. Bloss. five pet. irregular, with a spur behind; anthers cohering, caps. one-celled, three valved.

*Spec. Desc.* Stemless. Leaves heart-shaped, suckers creeping. Leaf-stalks nearly smooth. Fruit-stalks channelled on the upper side. Flowers with or without petals, producing perfect seed. Bloss. purple, blue, or white; very fragrant. Warm hedges, moist warm lanes, in clay or marle. Bloss. March, April.

*Use.* The violet was used by the antients in various inflammatory diseases, and was alluded to by the poets as a vulnerary. *Ovid Met.* The recent flowers only are now admitted into the *Materia Medica*; they have an agreeable smell, and a mucilaginous bitter taste; to water they readily give out their virtue and flavour, but with difficulty to rectified spirit. Taken in the quantity of a drachm or two they are gently *purgative*; and, according to *Bergius* and some others, possess an *anodyne* and *pectoral* quality. The officinal preparation of them is a syrup, which to young children answers the purpose of an agreeable *purgative*. The seeds are said to be strongly *diuretic*, and useful in gravelly complaints; and the root powdered, in a dose of a drachm, proves both *emetic* and *cathartic*.—*Woodville.* Both the flowers and seeds are said to be mild laxatives.—*Withering.* The flowers, and also the leaves, are cooling and emollient.—*Lightfoot.* The syrup of violets, which receives its colour from the petals, is very useful in chemical enquiries, to detect an acid or an alkali; the

the former changing the blue colour to a red, and the latter to a green: for this purpose the violet is cultivated in large quantities about Stratford upon Avon. Slips of white paper, stained with the juice of the petals, and kept from the air and light, answer the same purpose.—*Withering*. The Turks make a violet-sugar of the flowers, and this dissolved in water constitutes their favourite liquor called Sorbet.—*Lightfoot*.

24. VIOLA. *V. tricolor*.

*Ang.* Pansies. Heart's ease. Three faces under a hood. Love in idleness. Kiss at the garden gate. Call me to you. Herb Trinity.

*Gen. Desc.* As above.

*Spec. Desc.* With a stem, stipulæ wing-cleft, terminating at the end of the leaf stalk; summit urn-shaped. Stem branched, weak. Leaves egg-shaped, toothed. Floral leaves two on each fruit stalk, halberd-shaped. Calyx smooth, half the size of the blossom. Summit hollow, open, fringed on the lower part. Bloss. subject to great variety of colour, white, yellow, blue, purple, two or more of these. Corn fields, ditch-banks, &c. Bloss. May, September.

*Use.* Dr. Strack says, that this plant infallibly cures the scabby complaints in young children, called *crusta lactea*. He boils a handful of the fresh, or half a drachm of the dried leaves, in half a pint of milk; and gives this milk, strained, morning and evening, for some weeks.—*Medical Journal*, ii. p. 188. By many of the old writers on *Materia Medica*, this plant is represented as a powerful medicine in *epilepsy*, *asthma*, *ulcers*, *scabies*, and *cutaneous* complaints; but by modern authorities it has been recommended chiefly as a remedy for the *crusta lactea*. In addition to the dose above mentioned, bread, with this decoction, is also to be formed into a poultice and applied to the part: by this treatment it has been observed that the eruption during the first eight days increases, and that the urine, when the medicine succeeds, has an odor similar to that of cats; but on continuing the use of the plant a sufficient time, this smell goes off, the scabs disappear, and the skin recovers its natural purity. Haase administered this violet in various forms and in large doses, extending its use to many chronic diseases, (*see H. de viola tricolore*, Erlang. 1782.) and from the numerous instances of its success, it seems well deserving of further trial.—*Woodville*.

25. IMPATIENS. *J. Noli-tangere.*

*Ang.* Quick in hand. Impatient. Touch me not.

*Gen. Desc.* Cal. two-leaved. Bloss. five petal, irregular. Nectary hoodlike. Stem, cohering; caps, superior, one-celled, opening with a jerk into five spiral valves.

*Spec. Desc.* Fruit stalks many fl. solitary. Leaves egg-shaped, pendant at night. Stem, swoln at joints. Bloss. yellow with red spots. Moist, shady places. Bloss. July, August.

*Use.* The whole plant is considerably acrid. Goats feed upon it; horses, cows, and sheep, refuse it.—*Withering.*

26. RIBES. *R. rubrum.*

*Ang.* Currant. Red currant.

*Gen. Desc.* Petals five, they and the stamens fixed to the calyx. Style cloven. Berry beneath, one-celled, many-seeded.

*Spec. Desc.* Without prickles. Bunches smooth, pendant; flowers, flattish; leaves, segm. rounded; cal. spreading. Bloss. greenish-white. Berries red, sometimes white. In woods in the northern counties, banks of the Tees. Bloss. May.

*Use.* The fruit of this plant is universally acceptable, either as Nature presents it, or variously prepared by art with the addition of sugar. Its medicinal qualities are similar to those of other subacid fruits, which are esteemed to be moderately refrigerant, antiseptic, attenuant, and aperient. Hoffman and Boerhaave had great confidence in the efficacy of these fruits in obstinate visceral obstructions. They may be used with advantage to allay thirst in most febrile complaints; to lessen an increased secretion of bile; and to correct a putrid and scorbutic state of the fluids, especially in sanguine constitutions; in those of a contrary kind, they are apt to occasion flatulency and indigestion. The juice of the red currant is a most agreeable acid in punch; and at Paris, mixed with sugar, it is a common beverage, generally preferred to orgeat or lemonade.—*Woodville.* Cows, sheep, and goats eat the leaves; horses are not fond of them.—*Linn.*

27. RIBES. *R. nigrum. Grossularia non spinosa fructu nigro.*

*Ang.* Black currant. Squinancy berries.

*Gen. Desc.* As above.

*Spec. Desc.* Bunches hairy; flowers oblong, woolly; floral leaves woolly, as long as the little fruit-stalks. Buds glandular. Cal. segm. of a rich brown colour. Petals (No. 67.) Q sometimes

sometimes change into stamens. *Wet hedges, river banks.* Bloss. May.

*Use.* The berries have a very peculiar flavour, which many people dislike; but, together with the properties which they possess in common with other subacid fruits, they are peculiarly useful in sore throats, especially those of the inflammatory kind: for this purpose the juice is boiled down to an extract with the addition of a small proportion of sugar, in that state called *rob*. There is little doubt that, in cases of inflammatory *angina*, they may be advantageously used to answer the same intentions as gargles. They are said to possess a *diuretic* power also to a considerable degree, but this seems to want confirmation.

The common black currant jelly in domestic use, for the cure of sore throats, it may be observed, loses much of its efficacy by having too great a proportion of sugar in its preparation. These berries by some people are put into brandy, for the same purpose as black cherries, and more commonly in Ireland, into whiskey. The tender leaves tinge common spirits so as to resemble brandy: the leaves are said, in an infusion, to have a taste of green tea, and when young are thus, to some, peculiarly agreeable. These leaves are extremely fragrant, and have likewise been recommended for their medicinal virtue, which *Bergius* states to be *mundificans, pellens, diuretica*. An infusion of the young roots is useful in fevers of the eruptive kind, and in the dysenteric fevers of cattle. *Haller* says, that of this fruit, a wine may be made equal to any produced from the grape.—*Woodville*.—*Withering*.—*Haller*.—Goats and horses eat the leaves.—*Linne*.

28. HEDERA. *H. helix. H. arboracea.*

*Ang.* Ivy. Common Ivy.

*Gen. Desc.* Petals five, oblong; berry, four or five-celled; three to five-seeded; juiceless; encircled by the calyx.

*Spec. Desc.* Leaves, when weak and trailing, lobed; when climbing and strong, egg-shaped; glossy. Bloss. greenish-white. Berry black. Woods, old walls. Bloss. October.

*Use.* The leaves have a nauseous taste. *Haller* observes, that they are given in Germany as a specific in the *atrophy* of children. Common people apply them to issues.—*Withering*. In Scotland the Highlanders make an ointment of the leaves, which is much valued by them as a ready cure for burns.—*Lightfoot*. The berries have a little



the acidity; they purge and vomit. In warm climates a resinous juice exudes from the stalks. The roots are used by leather-cutters to whet their knives upon. The evergreen leaves adorn our walls and cover the naked trunks of trees. Apricots and peaches, covered with ivy during the month of February, have been observed to bear fruit plentifully.—*Withering*. Horses and sheep eat it; cows and goats refuse it.—*Linnaeus*. The seeds of ivy, blown by the wind from the tops of trees and houses, have sometimes been supposed to have rained from the clouds; and a distinguished member of the Royal Society declared them once to be wild garlick.—*Hill*.

### Pentandria, Digynia.

29. HERNIARIA. *H. glabra*. *Polygonum minus*.

*Ang.* Smooth rupturewort.

*Gen. Desc.* Cal. five divisions. Bloss. o; stam. five perfect, and five imperfect; caps. one-seeded.

*Spec. Desc.* Plant smooth, four to eight inches long, trailing, wood-like, knotted at the bottom; *flowers* numerous, yellowish, without petals. *Floral leaves* triangular, fringed. *Gravelly soil*. Bloss. July, August.

*Use.* A little saltish and *astringent*. It increases the secretion by the *kidnies*. The juice takes away specks in the eye. Horses, cows and sheep eat it; goats and swine refuse it.—*Withering*.

30. CHENOPODIUM, *C. Bonus, Henricus*. *Lapathum unctuosum*.

*Ang.* Mercury goosefoot. Common English mercury. All good. Good Henry. Good King Henry. Wild spinage.

*Gen. Desc.* Cal. five-cleft, five-ribbed. Bloss. o; seed, one; round, flattened, superior, horizontal, covered by the closing calyx.

*Spec. Desc.* *Leaves* triangular-arrow-shaped, entire, waved. *Spikes* compound, leafless, axillary; *little spikes* alternate sitting. Bloss. greenish-white; *flowers* congregated, sitting. *Rubbish, road-sides, walls*. Bloss. May.

*Use.* This plant is cultivated as spinage by the poor at Boston, in Lincolnshire.—*Curtis*. The tops are eaten boiled; and a decoction of the leaves is used in emollient clysters.—*Hill*. The young shoots, peeled and boiled, may be eaten as asparagus, which they resemble in flavour. They are gently *laxative*. The leaves are often boiled in broth. The roots are given to sheep that have a cough.

Q 2

Goats

Goats and sheep eat it, but are not fond of it; horses, cows, and swine, refuse it.—*Withering*.

31. CHENOPODIUM. *C. olidum*. *C. vulvaria*. *Blitum fatidum*.

*Ang* Stinking orache. Stinking goosfoot.

*Gen. Desc.* *As above*.

*Spec. Desc.* Leaves very entire, diamond-egg-shaped; flowers congregated, axillary, trailing, and smell like salt-fish. Road-sides, old walls. Bloss. August.

*Use.* Its smell is rank and fetid; it has got the reputation of being an anti-hysterical. Horses, cows, sheep and goats eat it; swine refuse it.—*Withering*.

32. CHENOPODIUM. *C. maritimum*.

*Ang.* Small white glasswort. Small glasswort. Sea goosefoot.

*Gen. Desc.* *As above*.

*Spec. Desc.* Leaves awl-shaped, accurately semicylindrical. Branches alternate. Flowers solitary, axillary. Style single. Summits three, pink-coloured. Seeds glossy. Sea shore. Bloss. August.

*Use.* This plant is an excellent pot-herb.—*Withering*.

33. ATRIFLEX. *A. nastata*.

*Ang.* Wild orache, Fat-hen. Lamb's quarters.

*Gen. Desc.* Bloss. 0. Flowers, some hermaphrodite, some female, on the same plant; hermaphrodite cal. five-leaved. Seed 1, depressed, upright. Female, cal. two-leaved. Seed 1, compressed.

*Spec. Desc.* Stem herbaceous, upright or trailing, angular, furrowed. Calyx valves of the female flowers large, trowel-shaped, indented. Leaves trowel or halberd-shaped, indented, or toothed, or entire. Varies much. Rubbish, dunghills. Bloss. August, September.

*Use.* This plant is sometimes gathered as a pot-herb, and eaten in lieu of spinage and other greens. Cows, sheep, goats and swine eat it, but are not fond of it.—*Withering*.

34. HUMULUS. *H. lupulus*. *Lupulus mas. et femina*.

*Ang.* Hop.

*Gen. Desc.* Male and female flowers on different plants. Bloss. 0; male cal. five-leaved; female cal. one-leaved, with a slanting opening, entire. Seed one, with a leaf-like calyx.

*Spec. Desc.* Stems climbing. Leaves lobed, serrated. Flowers greenish-yellow. In hedges. Bloss. July.

*Use.* The flowers of the female plant are the common hops.

hops used in brewing ale and beer; they grow wild in the hedges, but the value of the female flowers renders it worthy of being carefully cultivated: Soil and cultivation occasion some varieties, but for the purposes of brewing, they are commonly distinguished by the names of Kentish or Worcestershire hops. Hop yards might be preserved from the honey-dew, which is the excrement of a species of *aphis*, and from the ottermoth, by being covered with stones. See *Withering Bot. Ar. l. c. note*. A decoction of the young shoots is esteemed a powerful lithontriptic, —*Lightfoot*. A bag of hops placed under the pillow is an excellent soporific.—*Dr. Addington*. A decoction of the roots, or from twenty to thirty grains of the extract, is said to be sudorific, and to answer the purposes of sarsaparilla. The young shoots boiled, and eaten as asparagus, early in spring, are esteemed a delicacy; they are sold under the name of *hop-tops*.—It will dye wool yellow. Strong cloth is made in Sweden from the stalks; which, for that purpose, are gathered in autumn, soaked in water all the winter, and in March, after being dried on a stove, dressed like flax. Horses, cows, sheep, goats and swine eat it. —*Withering*.

What is that electrical murmur, like very distant thunder, when hop-poles are shaken by the wind?—*Linnaeus*.

35. SALSOLA. *S. Kali. Kali spinosum cochleatum. Tragus spinosus*.

*Ang.* Prickly glass-wort. Kelp-wort.

*Gen. Desc.* Cal. five-cleft. Bloss. 0; seed 1, beneath; coated by the calyx.

*Spec. Desc.* Herbaceous, lying down. Leaves awl-shaped, thorny, rough; calyxes bordered, axillary; flowers greenish. Sandy sea shores. Bloss. July, August.

*Use.* This, with several other species of the same genus, are among the marine plants, from which the fossil alkali, known by the name of barilla and soda ashes, is obtained. This species is most in use in Eastern countries. On the coasts of the Mediterranean, where the preparation of these ashes forms a considerable branch of commerce, the seeds of the salsola are regularly sown in a proper situation near the sea. They shoot in about a fortnight; and about seed time they are pulled up by the roots, and dried, when the seeds are collected; then tied in bundles, and burnt in an oven constructed for the purpose, where the ashes, while hot, are continually stirred with long poles. On becoming cold the saline matter forms

a hard solid mass; which is afterward broken into convenient pieces.—*Woodville*.

36. ULMUS. *U. campestris. U. sylvestris.*

*Ang.* Common elm.

*Gen. Desc.* Cal. five-cleft. Bloss. 0; caps. superior, one-celled, leaf-like, compressed; seed solitary.

*Spec. Desc.* Leaves doubly serrated, unequal at the base; flowers almost sitting, crowded, in a kind of corymbus. Flower-buds beneath the leaf-buds. Bark cracked and wrinkled. Hedges, hedgerows. In the South of England. Bloss. April.

*Use.* The inner tough bark, which is directed for use by the pharmacopœias, has a bitterish taste, but no peculiar smell: it abounds with a slimy juice, recommended in nephritic cases, and externally as a useful application to burns: this bark, on the branches, is more bitter than on the trunk. The outer bark has neither taste nor smell, and contains but little mucilage. The complaints for which this medicine has been used are chiefly those of the cutaneous kind, allied to herpes and lepra. Dr. Lysons mentions five cases of inveterate eruptions, successfully treated by a decoction of this bark, prepared from four oz. taken fresh and boiled in two quarts of water to one; of this half a pint was given twice a day. But as he added nitre, and used frequent purgatives, it may be doubted whether the cure should wholly be ascribed to the elm bark. It was found efficacious by Dr. Lettsom in the *lepra ichthyosis* of Sauvages; and in the *lepra vulgaris*, in a remarkable instance, by Banau; who proposes the use of it in rheumatism, fluor albus, old ulcers, cancerous and scrophulous affections, tinea capitis, scurvy, &c. (*Journal de Paris*, 1783, n. 255.) An obstinate perseverance of some months is requisite.—*Woodville*. This decoction, drunk freely, has been known to carry off the water in *dropsies*.—*Withering*. The bark, dried and ground to powder, has been mixed with meal in Norway to make bread, in times of scarcity.—The inner bark, boiled in water, makes an excellent mucilage used in sore throats and fevers.—*Hill*. The flowers have a violet smell. The wood, being hard and tough, is much used to make axle-trees, mill wheels, boat keels, chairs, coffins, &c. This tree bears transplanting, loves an open situation, and black or clayey soil, and does not destroy the grass under it: if grafted on the *U. glabra* it will not throw out suckers, with which it is apt to over-run the ground. Horses, cows, goats, sheep and swine

swine are fond of the leaves.—*Withering* And the tender leaves are devoured with avidity by silk worms. *Tr. Soc. Arts. ii.* 157.

37. *XANTHIUM. X. strumarium. Lappa minor.*

*Ang.* Lesser burdock. Burdock clottweed.

*Gen. Desc.* Male and female fl. on the same plant. *M.* cal. common, tiled. Bloss. one-petal, funnel-shaped, five-cleft; recept. chaffy. *Fem.* involucr. two-leaved, two-flowered. Bloss. 0; caps. double, prickly, cloven; nut two-celled.

*Spec. Desc.* *Stem* thornless. *Leaves* heart-shaped, three-fibred. *M. fl.* in a branched bunch, terminating. *F. fl.* in bosoms of upper leaves, fruit oblong, echinated. *Dung-hills.* Bloss. June, September.

*Use.* The leaves are bitter and astringent. A decoction of the whole plant affords a bright showy yellow colour; but it is better if only the flowers are used. Horses and goats eat it; cows, sheep and swine refuse it.—*Withering.*

38. *ERYNGIUM. E. maritimum.*

*Ang.* Sea eryngo. Sea holly.

*Gen. Desc.* Flowers forming a head; gen. invol. many-leaved; recept. chaffy; seeds rough, with flexible scales.

*Spec. Desc.* *Root* leaves roundish, plaited, thorny, three-cleft. *Upper leaves and leaf-stalks* embracing the stem. *Flowering heads* on fruit-stalks; chaff three-pointed. *Leaves* mealy, with a whitish wood-like border; angles ending in sharp whitish thorns. Bloss. whitish blue. *Sea shore.* Bloss. July, August.

*Use.* The root, the part directed for medicinal use, exhibits to the taste a grateful sweetness; and being chewed for some time, discovers a light aromatic warmth or pungency. Boerhaave esteemed this the principal of the *aperient* roots, and he usually prescribed it as a *diuretic* and *antiscorbutic*. It has likewise been celebrated for its aphrodisiac powers: but the effects of eryngo seem now to obtain but little credit. The root is frequently sold in the shops candied; and is made into a sweat-meat.—*Woodville.* The leaves are sweetish, with a light aromatic warmth and pungency.—*Withering.* The young flowering shoots boiled, have the flavour of asparagus.—*Linn.*

39. *DAUCUS. D. carota. D. sylvestris. D. vulgaris. D. polygamus.*

*Ang.* Wild carrot. Bird's nest.

*Gen. Desc.* Bloss. somewhat radiated; florets hermaph. leaflets of the involucre divided; seeds with membranaceous toothed ridges.

*Spec. Desc.* Angles of seeds 4, distant, hispid; leaf-stalks, fibrous underneath; umbel concave when in seed; flowers white or reddish. *Meadows, pastures.* Bloss. July, August.

There are several varieties of this species. See *Bot. Arrangement.*

*Use.* The seeds have a light aromatic smell, and a warm acrid taste; they possess, though not in a considerable degree, the aromatic qualities common to those of most of the umbelliferous plants, and hence they have long been deemed *carminative* and *emmenagogue*; but they are chiefly esteemed for their diuretic powers, and for their utility in *calculous* and *nephritic* complaints: in which an infusion of three spoonsfull of the seeds in a pint of boiling water has been recommended; or the seeds may be fermented in malt liquor, which receives from them an agreeable flavour, resembling that of lemon peel. Carrots have been given to children as a vermifuge. The expressed juice, or a decoction of the roots has been recommended in calculous complaints, and as a gargle for infants in *apthous* affections, or excoriations of the mouth; and a poultice of scraped carrot has been found useful, applied to *phagedenic* ulcers, and to *cancerous* and *putrid* sores; as well in mitigating the pain as in abating the smell.—This plant, in its cultivated state, is the well known garden carrot, which, as it possesses a large proportion of saccharine matter, affords consequently much nourishment, but it is found to be difficult of digestion.—*Woodville.* An infusion of the seeds in ale or water has been found to give immediate relief in sharp fits of the gravel.—*Lightfoot.*—*Withering.* The roots are a grateful and nutritious food for all kinds of cattle, and well worthy of attention; but, if given too long, they are apt to occasion bloody urine. *Ibid.*

[ To be continued. ]

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

THE good effects which I have frequently experienced from the external application of *Sponge*, lead me to submit to you the following observations on its efficacy as a dressing in many cases, in which I believe it is not at present in general use.

The first I shall mention, and indeed one in which I have never failed in giving the most marked relief, is Ophthalmia. The usual mode of applying refrigerant and astringent applications to an inflamed eye, is either by means of linen compresses or bread cataplasms, soaked in a saturnine solution. These are in many cases ineffectual; and in all inelegant, modes of dressing; the linen very shortly becomes exceedingly stiff, and the coarser particles of the lead being precipitated, give a constant and violent stimulus to the organ. Bread, although free in a great measure from the latter fault, produces so great an accumulation of heat in the diseased part, that it is rendered hard in a very short time; and if long applied, is reduced to a half-baked state. If this is attempted to be obviated by frequent renewal, the admission of light, in a great measure, counteracts the design of the application, and at night is impracticable. To avoid those inconveniencies, I am in the habit of applying a bandage composed of two circular pieces of fine sponge, extremely well beaten and washed, so as to remove any extraneous matter which might adhere to them, and then sewed to a bit of tape, so as to compleatly cover both eyes, and tie behind the head. If one eye only is diseased, the piece of sponge corresponding with it, is soaked in the application intended to be used, while the other excludes the light from the sound eye; an object of material consequence in every affection of those delicate organs, whose motions sympathize so strongly. By this means the remedy is kept constantly applied to the diseased part, the dressings never grow stiff, the stimulus of light is effectually excluded, and a greater and more uniform degree of cold is produced than can possibly be done by any other means, as a larger and freer surface is exposed to evaporation; added to which, the supply is constant, an object of great comfort to the patient, particularly at night, as he needs only to press the sponge and produce the desired quantity. I have at present a case

under

under my care, of the most violent ophthalmia I ever saw, and differing only from that which affected our troops in the late expedition to Egypt, in not being contagious; it had resisted every topical application to the eye itself. Blisters to the temples and behind the ears, purging with repeated doses of calomel, and even scarifications, had produced but a temporary relief. The application of the sponge however, immersed in a solution of vitriolated zinc, in twelve hours produced so favourable a change, as to do away the fears of suppuration taking place; and in the course of the ensuing day a rapid progress was made towards a cure; he is now in a state of convalescence. The sponge dressing is eminently useful in inflammation of the testicle; the usual application of a cataplasm impregnated with saturnine solution is not only extremely filthy, but from the great heat produced becomes very soon stiff, while a small bag of oiled silk or varnished linen, lined with a layer of prepared sponge, keeps the part constantly cool, moist, and immersed in the remedy, and acts as an excellent suspensory bandage. If the disease is produced from a gonorrhœa too suddenly stopped, a case of the same material with a bit of sponge soaked in warm oil, sewed in the extremity of it, will keep the glans constantly moist, solicit a renewal of the discharge, and together with the injection of warm oil, ensure a speedy termination of the complaint. And indeed, in every case of gonorrhœa, where cleanliness is indispensable and concealment frequently necessary, a case for the penis of this kind, with the sponge soaked either in an astringent or emollient application, as may be judged necessary, will be found extremely useful. In inflammatory affections of the extremities, particularly that species of paronychia, which runs so rapidly to a termination, as frequently to render amputation necessary, this dressing will be found excellent when impregnated with a very strong astringent. In almost every case of external inflammation, the medicated sponge is superior to any other application; and where, from the shape or situation of the part, it can be applied without any external covering (as the eye or knee). The rapidity of evaporation and consequent decrease of temperature will considerably augment the effect. When emollient applications and an increase of heat are indicated, both those intentions will be fully answered by applying the case lined with sponge immersed in warm oil. The relaxation of the surface produced is very rapid and effectual; in many cases so much so, as to produce a profuse perspiration



perspiration on the part. A particular friend, a patient of mine, who has been long a martyr to gout, is constantly furnished with an apparatus of this nature, which in him uniformly produces a great degree of perspiration and consequent relief of the fit.

My opportunities of trying this mode of dressing have been principally confined to inflammatory cases; and the good effects produced from it, in them, have been so obvious as to induce me to give a decided preference to it, where it can possibly be procured.

I am, &c.

*Strabane,  
August 4, 1804.*

JOHN HENNEN, Surgeon,  
3d Division of Light Infantry.

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CASE OF ANEURISM OF THE AORTA, AND CASE OF IMPERFORATED ANUS AND VAGINA. *Communicated by JOHN RODMAN, M.D. of Paisley.*

IN May, 1803, an unmarried woman, *ætat.* 30, while apparently in perfect health, suddenly fell from her seat, and was deprived in a few moments of every symptom of life. Several means were used to restore her, but she was dead.

*Dissection Two Days after Death.*

The blood-vessels of the brain were uncommonly turgid. No other diseased appearances were observed within the cranium.

The aorta was so much dilated, that from its origin to the curvature of the arch, it measured fully five inches in diameter from right to left, and was filled with coagulable lymph hardened like a cake. The external side of this part of the vessel was greatly thickened, and adhered firmly to the sternum. The internal surface of the dorsal side was ulcerated, and at a place considerably eroded, it had burst within the pericardium, which also was much distended and filled with blood.

I was informed, after the dissection, that without any known cause a tumour appeared to the right of the sternum eighteen months ago, protruding like the face of a watch, and attended with strong pulsations. About this time she applied to a surgeon for advice, but no means were used for her recovery, and the tumour soon vanished.

It

It is singular that she took little notice of it after this, and seemed to feel no further inconveniency from it. She had a good appetite, menstruated regularly, and continued very corpulent.

It was remarked, that of late she had been occasionally affected with lipothymia or smoozing, as it was termed, and that while walking up hill her breathing was quicker than usual, yet within three months she had travelled twenty miles in a day with apparent ease. Her period of menstruation was about the time of her death.

This case affords an instance, in which a medical man might have been deceived more readily than in the one detailed by Dr. Moody, No. 62, of this Journal; for in the former, the tumour gradually disappeared, leaving no external marks of disease; whereas, in the latter, the tumour remained as a constant memento mori. Both patients experienced a degree of health greatly beyond what theory can lead to suppose.

Being desired to visit a female child, in September, 1803, which had not the smallest vestige of an anus or vagina, although the urethra was natural, I attempted to procure a passage from the rectum without success, and the child died.

Upon opening the body, the bladder was found to be the common receptacle for the kidneys and intestines, and the only vagina from the uterus. The rectum terminated in a kind of tube, sending out a small projection like a beak, which penetrated the back part of the bladder, nigh its neck, and opened into it obliquely downwards. The uterus was united with the fundus of the bladder, and projected very little above it. Within the bladder the os uteri and ending of the rectum were distinct, but none of the meconium had passed from the intestines.

In giving this case it may be proper to mention, that during the three days which the child lived, air was frequently observed issuing out by the urethra. Attention to this circumstance may lead, in similar cases, to a different prognosis from what might otherwise be given.

July 18, 1804.

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

**ALTHOUGH** I have not particularly attended to the Controversy, concerning the use of cold applications in cases of arthritic inflammation, in some late Numbers of your Journal, yet I presume the following facts will be acceptable to those gentlemen who have interested themselves in that discussion.

A few months ago, I was informed by a flag-officer of my acquaintance, that when in the service of Portugal, and employed in South America, he was seized with a severe fit of gout in the ball of the great toe; from which, by acute pain, and a considerable degree of inflammation, he was unable to move about. An old major of the army, who was subject to gout, had a command in the neighbourhood, and undertook to cure my friend, as he had often done himself, by immersing the foot in cold water. The river, in which the ship lay at anchor, happened to be much swoln with snow-water, that at a certain time of the year comes from the high mountains of that country; and in order that he might have full advantage of water at the coldest temperature that could be procured, he was carried in his barge to the middle of the river, and there plunged the affected foot into the stream. The water might probably be from 40° to 50° of Farenheit, which is cold for these latitudes. He felt immediate ease, and was soon relieved from this fit of gout. But while the old Major's method of cure was going on successfully with the English officer, he was affected himself with a painful fit of the same disease. He had recourse to his usual remedy. The pain and redness left the great toe, and he thought himself cured. But while he was exulting in his fortunate escape, good easy man! he was seized with apoplexy, and died in a few hours. Since that time, now thirty years ago, my friend has scarcely suffered any attack of regular gout; but he consulted me for complaints, which I conceive to be *anomalous* gout; such as vertigo, hemicrania, dimness of sight, and dyspepsia, with all its train of nervous affections. These he has had, in some degree or other, ever since he was in South America.

Now, I believe occurrences of this kind are not uncommon in medical practice; for we observe accidental cold produce all the evils that are here mentioned. The experience

perience of physicians in all ages, has been very uniform in this respect. Hence the general opinion has wisely directed, that the gout should be consigned to *patience and flannel*, lest a more serious complaint should be the consequence of driving it from the extremities. I have not seen Dr. Kinglake's book on gout; but from what I may judge of his communications in your Journal, he will find it a difficult task to prove that this disease is a local one. One of the most exquisite cases of gout which ever came within my knowledge, was in a gentleman of thirty-two years of age. A hereditary disease was early brought into activity from intemperance. I have seen the inflammation of the extremities alternate with fits of epilepsy and hysteria, in the space of a few hours. I have seen him in the most excruciating pain from *gastrodynia, colica, and affections of the kidneys, ureters, and bladder*, when the redness of the joints suddenly disappeared; and I have stood by, while he took *opium, æther, or ardent spirit*, for relief, and the pain and redness would almost instantly be felt again in some of the articulations of the hand or foot. This gentleman died soon after.

I am, &c.

T. TROTTER.

Newcastle upon Tyne, July 20, 1804.

### *To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

**T**HOUGH theoretic productions have in medicine been censured, and are now pretty generally become the objects of contempt, this has not happened from the culpableness or inutility of theory, but from the manner in which such productions were formed. For instead of theorizers going on regularly and with great care, to make inductions from matter of fact, they have spun their doctrines out of their own imaginations. I am now to call your attention to theories, or rather a system, which I conceive formed from facts alone. I began about eight years ago to investigate according to the principles laid down by Lord Verulam; and have finished a system he endeavoured to build, entirely according to the same. Whether it be true must be decided by the judgement of others; but the plan on which

which I attempted to proceed cannot I trust but meet with general approbation; and must, *when ably pursued*, lead to great improvements.

The work I allude to is entitled "Outlines of a Treatise on the disordered States of the Lungs." This, in the first place, shews what agents disorder the lungs, in what manner they act, and what disordered states they occasion; it then enquires into the consequences which must arise from those disordered conditions of the pulmonary organs; it finds, particularly, that when the lungs are over-charged with blood, the *venæ cavæ* cannot properly discharge *their contents*; and consequently, that the *venæ jugulares*, and *venæ hepaticæ*, cannot sufficiently discharge *theirs*; and from *these* being overloaded, it discovers various affections (especially named) which must attack the *head* or *liver*. The diseases which arise from a turgescence of the superior cava are made to form one class; and those which spring from a turgescence of the inferior, are formed into another. But a third, and very important class, is formed of those diseases which arise more immediately from an accumulation *in the lungs themselves*. The third part of the work contains such exceptions as may be made against any part of the preceding work, with the reasons why they do not in reality militate against its truth; and such indication of prophylaxis, or treatment of the diseases, as arise from the before-mentioned view of their origin and nature. Notwithstanding the plan I prescribed to myself in forming the above work was such as, if rigidly adhered to, and ably pursued, must have excluded errors; and notwithstanding also the execution took up many years, I am fully sensible error is not impossible; but the work has had my greatest care, and if any others are disposed to point out errors, I shall be very happy to be informed of them.

I have thought it proper to call your attention to the above work, because it was executed upon a new plan; and if true, must lay the foundation for a new system of medicine.

I am, &c.

THOMAS ALDER.

Lincoln, August 7, 1804.

ACCOUNT

ACCOUNT OF A VERY REMARKABLE CHALYBEATE SPRING,  
*lately discovered near Reading. Communicated by Dr.*  
 J. DOUGLAS.

**M**INERAL Springs of a chalybeate nature are by no means uncommon in this island; but very few, either in strength or efficacy, approach the Caversham Spa. It is situated upon a hill, about a mile from the Thames, on the Oxfordshire side of the river, and nearly two miles from Reading; a number of springs arise in the neighbourhood, but none perceptibly possessing any chalybeate property. When first discovered, it was a muddy pool covered with an ochreous crust reflecting a variety of colours. The proprietor erected a pump to exclude the atmospheric air; since which time, the water, when first drawn, has been clear and sparkling.

The smell immediately detects sulphureous gas, but it is not so strong as to give a decided character to the water. To the taste there is a very strong astringency, which remains for a considerable time upon the palate. It instantaneously produces a very deep black with infusion of galls or tea. Exposed for a short time it loses its brilliancy, and in a few hours becomes muddy, most probably from the escape of carbonic acid gas by which the iron is supposed to be held in solution. In less than two days all the iron is deposited, as the tests no longer detect it in the water. From a gallon, thirty-two grains of solid contents were procured, the greater part of which seemed to be an oxyd of iron.

It would be unnecessary and presuming, to point out to medical men the particular complaints and constitutions in which a mineral water of this nature proves useful. In many diseases of debility the most striking effects have been evinced. Though little more than a year since its first discovery, its fame has extended to the whole surrounding country, and the credulous may be daily informed of the wonders achieved by this powerful medicine. It is not necessary that we should believe exaggerated report, as authentic evidence exists in a great variety of cases where it has been eminently useful.

Much caution is necessary in its exhibition. It is highly stimulant, as a quarter of a pint will in many induce feverishness and head-ach, and that almost instantaneously; the dose should therefore be at first small, and afterwards regulated

regulated according to its effects. It often confines the bowels, and frequently operates by urine. To be drank with greatest advantage, it should be had fresh from the pump, and then there cannot exist a doubt of its being superior in strength to the celebrated Tunbridge chalybeate.

August 12, 1804.

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*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

LET me beg of you again to permit me to exercise a little of what some may be ready to term hyper-criticism. Your candour will more readily incline you to yield to my earnest request when you find that my observations are no longer upon places where, or persons who, but directly *ad rem*, to the thing in which the inhabitants of the whole world are interested.

In page 182, (Aug. 1804,) ye say, "Allowing the facts, the contradiction can only be explained by admitting the possibility of both perfect and imperfect vaccination, from a vitiated source, under similar circumstances, and in each case with an entirely regular progress of the inoculated vesicle."

How will this be understood by your readers in general? Are we *ipso facto* to admit such possibility? or are we only to admit it *ad absurdum* or *ex absurdo*? From more vexatious and teasing experience than I hope has fallen to the lot of any other individual, I have learnt that perfect cow-pock cannot possibly be produced from a vitiated source; while it is a fact that matter taken from the centre of a perfect pock, and of a proper age, may utterly fail to produce the desired effect, though most dexterously applied with the lancet.

Every body is acquainted with the efforts of nature in the reparation of injuries; the formation of callus after fractures, of cicatrix after the destruction of soft parts. I believe the epidermis is not united after being cut, abraded, or lacerated, without its formation of cicatrice. It is this perhaps which is principally the occasion of the characteristic depression in the centre of the cow-pock, from its earliest formation. In the incipient pock the cicatrice

(No. 67.)

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does

does not allow it to swell out full on its summit. When it has acquired its full dimensions it might be expected to be flat, like extensive blisters from a scald, while smaller ones are nearly spherical. At such time we know the variolous pock breaks into a number of distinct vesicles, while the vacciolous one,\* (or rather the vacciolous congeries of cells) which it is necessary to break up by various punctures in obtaining the guardian fluid, keeps united. If the inoculation have been neatly performed with a sharp instrument, the genuine vacciolous fluid is immediately obtained on puncturing it with the lancet, and can never be taken too soon. If by many punctures and pressures on the pock an increased flow of fluid be promoted, the lymphatic discharge so excited may afford an ichor or virus somewhat diluted; and if by the wounding of some ramification of blood-vessel it become distained still further dilution is occasioned; but such matter, in a thousand instances, I have found to produce only the genuine effect. On the other hand, if the inoculation have been performed by an untoward application of the instrument, or by too heavy a hand, an action is set up which gives a different appearance to the pock. A small scab is soon formed at the place

\* Why should we say Vaccine, &c. *a la Francoise*? The world is much indebted to the French chemists for their new nomenclature; but, as we lay aside our term cow-pock, of Gothic origin, and adopt a technical (classic) one; either let us follow the original one of Jenner, *variola vaccina*, or the more happy one of Stokes, *vacciola*. From the villages all about town we have milk; from Cambridgeshire, butter; from Cheshire and Gloucestershire, cheese. All this is vaccine matter; and, *a fortiori*, the flesh of the animal is so; but vacciolous matter is matter of vacciola or cow-pock, which rather better admits of all the changes of verb, participle, adjective, &c. being rung upon it than *vaccin*. I hope ye will more steadily adhere to the use of it, in opposition to the French inaccuracy, which many of our most eminent vacciologists so complaisantly adopt; (thus shewing that the greatest physiological skill by no means implies or promises philosophical acumen) I hope this, because I consider your Journal as the most extensively spread medical work we have. At any rate it will be well for you, when ye make mention of the important subject, yourselves, to adhere steadily to one or other of the two terms; otherwise all your movements will appear extremely *vaccillatory*, which would be but very badly suited to your own *unwavering* conviction on the efficacy of vaccination.

From Ring's elaborate "Treatise on the Cow-pox," I extract the French Nomenclature, which I am sorry to have seen him follow in so valuable a work, in order to contrast it with the more happy one which naturally arises from the root *Vacciola* of Stokes.

| FRENCH.             | STOKES'S.          | ENGLISH.               |
|---------------------|--------------------|------------------------|
| <i>Vaccine.</i>     | <i>Vacciola.</i>   | Cow-pock.              |
| <i>Vaccin.</i>      | Vacciolous matter. | Cow-pock matter.       |
| <i>Vaccination.</i> | Vacciolation.      | Cow-pock inoculation.  |
| <i>Vacciner.</i>    | To vacciolate.     | To inoculate cow-pock: |



place of inoculation, underneath which a quantity of pus is collected in the cavity, which it forms and fills; in the centre of the pock. If the lancet be charged with this matter only, no effect is produced; and in this way we must account for those failures which sometimes happen in inoculating from an otherwise perfect vesicle; while matter taken from punctures made in the sides of such pock produces the perfect effect. If the scab be removed from the pock, and the pus be wiped away, it then represents in form, if we may be allowed *magnis componere parva*, the crater of a volcano, rather than any thing like a regular tumulus; and on being broken down with the lancet, gives, in diminished quantity, a fluid equally active with that from the uninterrupted and fully formed pock.

Respectfully,

JOHN WALKER.

Salisbury Square, 12, viij. 1804.

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### *To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

A Real Campaigner from Egypt, endeavouring to understand the flighty proem of the Old Campaigner, p. 173, in your last Number, is completely "galled by the miscellany," finds himself wholly incapable of comprehending it. While the fall of the gallant veteran, or what is by far a greater character, of the humane general, has been universally deplored, your Campaigner is perhaps the first who has made it any matter of wonder that the old general should have fallen a victim to a dreadful wound in the arid climate of Egypt.

Mr. Gilham informed Sir Ralph Abercrombie, on examining the wound, that he discovered a ball, and proposed its extraction. On this the General said he sensibly felt it, and cheerfully consented to the operation; which Mr. Gilham was commencing, when a Field Inspector arriving, and differing in opinion with him, the General was taken to the fleet, where he died, aboard the Admiral's ship.

Mr. Robinson, Inspector of Hospitals, found the ball after death in the situation where Mr. Gilham had declared it, namely, in the *cervix femoris*, near the *trochanter major*.

Fleet Street, August 15, 1804.

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To

*To the Editors of the Medical and Physical Journal.*

“ His Highness yet doth speak ; and holds belief,  
 “ That being brought into the open air,  
 “ It would allay the burning quality  
 “ Of that fell poison, which assaileth him.”

KING JOHN, Act 5, Sc. 7.

GENTLEMEN,

**A**FTER having just now, for the first time, finished the perusal of DR. CURRIE'S valuable REPORTS ON THE EFFECTS OF WATER IN FEVER, I sit down to communicate a few observations which have occurred to me on the subject.

I do it with the greater confidence, as that good man and great physician has done me the honour to mention with respect a communication of mine to your Journal for August, 1802; a communication which arose out of the painful personal feelings of my own case, and that of others of my family, which did not fail to awaken every energy of my mind. On that occasion, I expressed an idea, which had taken strong hold of my imagination, that as the discharge of gonorrhœa is suspended by an astringent injection, so typhus fever might be by affusion; but that some specific disposition of generating preternatural heat, remained in the system for fourteen days. This no doubt was a relic of the old and ridiculous critical-day system, and I am very happy to sacrifice it at the shrine of truth, established by Dr. Currie's more bold and decisive practice. I cannot, however, help flattering myself with the idea, that, though I may in some instances have unnecessarily encroached on the time of my patients, I do not recollect one case in which the plan eventually failed me; and that in all, I avoided the risk of syncope, which it appears has happened to some of Dr. Currie's communicants; and the probable occurrence of which, from the too sudden abstraction of heat, I trust I shall be able to elucidate before I bring this paper to a close.

With regard to the theory of fever, I am perfectly satisfied with the modification which Dr. Currie has given to that of Dr. Cullen; and think it the best that can be given in the present imperfect state of our knowledge respecting the laws of animal life. I have always been of opinion, that there was no occasion for *synocha* in our discrimination of fevers, and have seldom been at a loss to account  
 for

for every excitement of the system, which did not ultimately terminate in typhus. In this disease, owing to the spasm on the minute vessels on the surface of the body, these vessels, and the skin itself, become bad conductors of heat. This subtile elastic fluid, which during a free circulation is carried along with the blood to the extreme vessels, and is constantly passing off in perspiration, is, under these circumstances, accumulated in the centre of the body in the large vessels, distending them in such a manner, as to render them incapable of contracting so as to propel it to the surface; just as we find the bladder once distended much beyond its tone with urine, incapable any longer of contracting to expel its contents.

The suffusion of the eye, however, shews distinctly not only the distensive, but also the stimulating property of the matter of heat, where this spasm and resistance do not exist, at least to the same degree.

The idea that heat is a material substance, and may be pressed out of bodies like water out of a sponge, is a beautiful and correct comparison, and if kept in view, may be made very subservient, I apprehend, to a better conception of the nature, not only of typhus fever, but of all diseases of increased action of the vascular system. Your readers do not need to be informed of the common expansive power of heat; nor that a certain quantity of some elastic fluid (for philosophers I observe have been rather shy of giving it a specific name) is diffused through every part of the human body, to counteract the pressure of the external atmosphere.

Now, when we consider that the capacity of the bones of the head is but just sufficient to contain the brain; and that the most trifling thing insinuated between the bones of the head and brain, is not only capable of disturbing the functions of that organ, but not unfrequently of occasioning even the death of the patient; we shall not be surprized, if an increased quantity of heat, circulating along with, and distending the fluids, should produce exactly the same effects. If I mistake not, Sir George Shuckburgh has proved the expansion even of common air to increase at the rate of the 440th part of its volume, for each degree of increased heat on the scale of Fahrenheit. The circumstance of this expansion is easily proved by holding a bladder partly inflated before the fire; for no sooner is the included air affected by the heat, than it begins to expand itself and distend the bladder.

Now, I suppose, it is generally known that the increase

of temperature in typhus fever, and other diseases of increased excitement, is not unfrequently 8 or 10, and sometimes more, degrees higher than the ordinary temperature of the human body. This expansion, increasing in a compound ratio, according to the above reasoning, must not only greatly distend the volume of the fluids circulating through the vessels of the brain, but must also at the same time much diminish the internal area of the vessels themselves, and of course their capability of freely circulating such fluids. The bones of the head will not be proportionably, if at all, dilated; and of course must resist the external dilatation of the vessels contained within them. The obvious consequence must be (if I may so phrase it) a *congeries of compression*. And I have little doubt, that while this account of the matter accords with the soundest principles of philosophy, it applies well also to the general circumstances which take place in typhus, and accounts for the disturbed functions of the brain in this disease; the cure of which is most effectually accomplished, as Dr. Currie and other philosophical practitioners have abundantly proved, by reducing the temperature, or, in other words, by abstracting the matter of heat from the system. The pain which takes place in the breast and back, may also be accounted for on the same principle.

Dr. Gregory, my much respected teacher, who has completely anticipated the remarks I had to offer on *scarlatina*, when on the subject, *De Sanguinis naturâ*, in his valuable *Conspectus*, says, "*Sanguis e venis missus, tenuem vaporem primo exhalat, fere aquosum, levissime olidum, sed parvâ admodum quantitate.*" Now, though the quantity of this vapour in the blood may be small, can we be at a loss to account for the power of this active agent, heat, upon it, in producing the above consequences? or hesitate a moment respecting the propriety of abstracting part of it, when so morbidly increased, from the system, by the best means we are able to employ? when we consider that the particles of a single drop of water, may be distended so as by its elastic power to raise a ton weight, or the mischief it is capable of producing, if accidentally dropped into the mould, in which a cannon is about to be cast; when we consider the above experiment of Sir George Shuckburgh, and how much more expansible this vapour may be than common air, and that the temperature of the human body, under particular circumstances, varies from 84 to 112, as we learn from Dr. Currie's Reports. From considering the matter in this point of view, I apprehend we shall no longer

longer be at a loss to account for the exacerbations and remissions of fever; the first taking place generally about five o'clock in the afternoon, the time immediately succeeding the hottest part of the day; the latter about the same hour in the morning, generally the coolest part of the night.

As syncope frequently occurs from too suddenly evacuating the contents of the abdomen in ascites, so I apprehend it will frequently follow the too sudden abstraction of heat in typhus; and thus, instead of abstracting it more slowly, and giving the vessels an opportunity to contract gradually, by the sudden dash we may instantly so diminish the volume of their contents, that they may not be able to contract upon them. \* This seemed to happen in the case of Dr. Ord, and appears to render the opinions of Dr. Jackson and Dr. M'Lean, that it acts only through the medium of sensation, very untenable indeed. Dr. Macneil seems also to think the sponging is better than the dash. The more this subject, in my opinion, is considered in a mechanical point of view, the sooner will correct ideas be formed respecting it: On this account I shall merely allude to the circumstance of the sudden collapse of vapour, in the piston of a steam engine, from a jet of cold water. I am confidently assured, that it is no unusual sight in the West Indies to see pigs, which have been exposed to excessive heat in being brought to the towns in baskets, on the heads of negroes, instantly die on being affused with cold water. The small space which the blood seems to occupy in animals that have been frozen to death, is also illustrative of this circumstance.

The sudden and unequal contraction of the stomach, from taking too great a quantity of cold liquid into it at once, has frequently been known to occasion unpleasant consequences. I experienced myself the most extreme pain about a fortnight ago, from this circumstance. By a due consideration of the subject in this point of view, and that the temperature of the human body may be made to vary, as has been shewn, near thirty degrees, few I apprehend will doubt, that a bulk of material substance may thus be abstracted from the system, equal to, if not greater than, six or eight times the quantity of blood that could in any case with safety be taken away. I also think it highly probable, that such a quantity of the matter of heat will be no less stimulating than an equal bulk of blood would be, provided the temperature of the body was diminished in an adequate proportion. I always

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counteract the temporary excitement consequent on good fellowship by almost constantly sponging myself with cold water till it ceases; and was much amused with Mr. Weekes's plan, as stated by Dr. Currie.

I own I am an advocate for the mechanical theory of the production of animal heat, and think this manner of accounting for it has evidently the advantage of the present chemical one. There are insuperable objections, I think, to that of the ingenious Mr. Rigby, that animal heat is generated by the decomposition of the food in the stomach and bowels. For the complete refutation of latent heat and all its dependences, see my ingenious friend Mr. Tillock's account of the matter in his *Philosophical Magazine* for 1800. By the bye, I was much surprized not to find the name of Rigby, who has done so much for the philosophy of medicine, not only in this but in other departments of it, once occur in the whole of Dr. Currie's work; which makes me conclude that Dr. C. cannot have read his book on Animal Heat. Throughout that whole work, Mr. Rigby, with the true spirit of a philosopher, regrets that from extensive practice his opportunities of acquiring philosophical knowledge, had not been so great as he could have wished; and seems fully sensible that those improvements in our profession, which are established on natural knowledge, are always the most durable and most easily comprehended. Such, I trust, the plan, so fully, explicitly, and ingenuously treated by Dr. Currie, will appear; and I think he need not be very solicitous about its fate; as from its merits it cannot be long before it be generally adopted, "*even in London.*"

A friend of mine, an eminent physician, lately had the disease here. He was attended by three physicians of great celebrity. It appeared he had every bad symptom, and was in imminent danger; when his lady, a woman of a strong mind, with more affection for her husband than regard for the dogmas of the schools, ventured on the cold bathing plan, which happily was in time to recover the patient. I forbear to mention the name, as I have not had an opportunity before I send this of asking leave to do so: the name, however, would add dignity to this communication. I own it would afford me great pleasure to see the advocates of the old system adopt the one inculcated here, or give some good reason for not doing it. I wish much to have our profession considered not as a trade; but as a science, connected with other branches of philosophy, and its principles reasoned on accordingly.

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The yellow fever of the West Indies, and the plague itself, I should apprehend, are but modifications of typhus; their excessive malignancy depending on the more quick and rapid excitation of heat: I speak this, however, with that diffidence which ought to belong to one who has never seen either disease. Dr. Falconer, it seems, thinks the latter may be prevented by cold bathing. If I should differ in opinion from this most respectable physician, I should not hesitate a moment to think myself in the wrong; but really I cannot see why both diseases may not only be prevented, but cured also, by a judicious and scientific administration of the plan.

I am aware that some of these suggestions will appear, to many of your readers, altogether Utopian. I care not, however, if I make but one proselyte. Regardless about the fate of the theory, I am desirous only of establishing the facts; and it is my intention to prosecute this subject more in detail on some future occasion.

I have seen cases similar to that mentioned in page 47 of Dr. Currie's work, and ask, what effects might be expected in such cases, from occasionally sponging the head with brandy or even æther, while the rest of the body was kept cool by affusion?

I have long been in the habit of estimating heat as a mechanical power, and acting with it accordingly in the treatment of disease; nor have I, under any circumstances, found reason to doubt of my theory. Nothing more is necessary in my opinion to establish Dr. Currie's views, than strongly to inculcate this idea.

Convinced of their truth and importance, may his MEDICAL REPORTS find many ECHOES on *this* side of our happy Island; and may he long continue to enjoy the satisfaction, which cannot fail to result from the success of his well-conducted labors.

Margaret Street,  
Aug. 6, 1804.

I am, &c.

RALPH BLEGBOROUGH.

CASE OF A DROPSICAL ENLARGEMENT OF THE ABDOMEN;  
*communicated by Mr. JOHN PULLEY, of Bedford.*

**G**EORGE BERRIDGE, a healthy lad, eighteen years of age, was lately admitted into the Bedford Infirmary with a dropsical enlargement of the abdomen. Two years and upward

upward since, he received a kick from a horse on the left hypochondriac region, which was attended for some time with pain, and very speedily succeeded by a sensible enlargement of the body. At the time of the accident he had no surgical assistance, and suffered but little injury in his health. The swelling of the abdomen went on increasing to the period of his admission into the infirmary, unaccompanied by symptoms of irritation, or any apparent deviation (excepting the tumour, and a slight pain occasionally about the epigastric region) from a state of perfect health: his appetite was good; his chyle formed well in quantity and quality, as digestion went on without anxiety, and he lost no flesh; his pulse was regular, and respiration uninterrupted; and his excretions in every respect natural. During his residence in the hospital, he took such medicines, under the direction of his physician, as appeared likely to give a chance for the removal of the swelling, but without effect; therefore it was determined to have recourse to the trocar on the 24th of this month. It ought to be remarked here, that the swelling of the abdomen was uniform in appearance, and that the touch received an uniform sensation of fluctuation, not more or less evident in one part than another. On the day appointed, I divided the integuments with a lancet about an inch and a half below the umbilicus, in the direction of the linea alba, and then thrust the trocar into the abdomen, which penetrated with more than usual difficulty, as the integuments receded much inward. On withdrawing the trocar, the fluid issuing through the canula in a very interrupted stream, a probe was introduced, when several portions of ruptured hydatid vesicles were emitted with the aqueous matter. By this time about three quarters of a pint of yellowish fluid were discharged; and it being then very evident that the dropsical affection was encysted, the canula was withdrawn, and the lips of the wound brought together as speedily as possible. The lad was put to bed without suffering from pain or faintness; but in a few hours he was attacked by peritoneal inflammation, and died on the following day, about five in the afternoon. The next morning, in conjunction with the professional gentlemen of the infirmary, I opened his body, and the appearances on dissection, though not singular with regard to the disease, were peculiar in extent, and therefore seem well worthy of remark.

#### DISSECTION.



## DISSECTION.

On dividing the integuments downward from the ensiform cartilage, the peritoneum was incised, when a yellowish fluid burst out; and on prosecuting the incision, it was copiously evacuated. The necessary division of parts being made, a large cyst, capable of containing full two gallons of water, was discovered; it adhered firmly to the anterior part of the peritoneum, to the liver, spleen, and omentum; it was, in every respect, a perfect sac, without the *direct* aid of the peritonem, and occupied the greater part of the cavity of the abdomen. Within this cyst, hydatids were contained to the amount of several hundreds, floating, globular in form, and varying in size, from the bigness of a small pea to the magnitude of a hen's egg. Without this sac, but adhering to it, in the left hypochondriac region, and on the under side of the spleen, were situated two other hydatids of considerable size; they were not in contact with each other, but adhered firmly to the spleen, which viscus appeared diminished in its usual magnitude, as it was much expanded on the surface of these cysts, probably owing to compression. Another hydatid, containing not less than half a pint of fluid, but which, when removed from the body, was accidentally punctured, was situated above the spleen, and adhered firmly to the diaphragm. In the right hypochondriac region, between the larger lobe of the liver and the diaphragm, and firmly adhering to them, another hydatid was found, irregular in form, and about the size of a small orange. Under the liver, between the lobula Spigelii and the gall-bladder, was placed another hydatid about the size of a hen's egg, much indented about its centre, and assuming that appearance which we should suppose the uterus to obtain in its hour-glass contraction. Another hydatid, similar in form, but somewhat less in size, was attached to the peritoneal covering of the colon near to its sigmoid flexure. The last hydatid to be mentioned was situated chiefly within the pelvis, between the urinary bladder and the rectum; it contained not less than half a pint of fluid, and took much the form of a child's head on its egress from the pelvis. The circumference of this hydatid measured ten inches and a quarter, and from point to point, eleven inches and a half. It is singular, that this tumour occasioned no interruption to the evacuation of urine or fæces. The larger hydatid adhering to the spleen, measured, in its body, ten inches and three quarters,

quarters, and from point to point, twelve inches and a quarter; the other was not much inferior in size. Throughout the dissection, there appeared no visceral disease. In the thorax no hydatid was contained, and the heart and lungs maintained a healthy aspect. In the abdomen, those hydatids connected with the liver, were attached to its peritoneal covering, without arising from or interfering with its substance. Perhaps it may be conjectured, that those hydatids attached to the spleen, arose within its substance. Most of the smaller hydatids were very transparent, containing a fluid "limpid as the crystal stream," and not coagulable.

I am not aware that any case of hydatid-formation has been offered to the public so extensive as the present; but a case, very nearly allied, is related by Cheselden, in his *Anatomy of the Human Body*, published in the year 1713.

Whatever may be the prevailing opinion concerning the formation of hydatids, it would appear, in this instance, that they took their origin from the accident. Inflammation of the peritoneum, doubtless, was the consequence of the kick, and probably an effusion of coagulable lymph, the birth of cystic dropsy. The largest sac was connected with the part that received the inflicted blow; most probably, it was the first formed, and from its rapid increase, possibly it assumed an inflammatory state, and by an effusion of coagulable lymph from its inner surface, might give rise to the existence of those minor hydatids, which were found floating within its cavity. This sac possessed much firmness and density, and certainly was highly vascular.

**CASE OF EXTENSIVE SUPPURATION, attended with uncommon Appearances, terminating successfully; communicated by JOHN MOODIE, M. D.**

**JOHN SKRINE**, a man bred to farming business, naturally of a robust and healthy constitution: but from the information of his apothecary, it appeared that he had lately suffered much from syphilitic infection. The 18th of September, 1801, he consulted me respecting a painful affection, which he had for some days felt about the top  
of

of his right shoulder, which, he said, his friends persuaded him was rheumatic gout, and advised the use of the hot-bath, or dry pumping applied to the part affected.

Upon examination, I found an enlargement possessing the whole articulation of the *humerus*, attended with redness, throbbing, tumour, increased action of the vessels, tension, and impaired strength of the arm. His cheeks were alternately flushed, with frequent severe rigors, and other symptoms indicating a tendency to suppuration. His tongue white, skin hot and dry, with great thirst, flatulence, and acidity at stomach. Pulse hard and full, belly costive, his urine high coloured, and voided in small quantities.

On consideration of the above symptoms, I was apprehensive that the suppurative process had already begun, or was unavoidable, and that it would be impossible to effect a cure by resolution.

Having cautioned him against the use of the pump, a gentle laxative was directed to be taken occasionally; and a saline mixture with the *pulvis antimonialis*, of the London Dispensatory, two large spoonfuls every three or four hours, with an opiate at night.

The patient living at some distance from my residence, I heard nothing further from him till the 23d, when he again personally applied to me; I desired to know if he had followed the directions previously given? He seemed desirous to conceal what had been done, but acknowledged, that, at the urgent solicitation of his friends, he had been induced to try the *metallic tractors*, but finding no relief from that expedient, he next had recourse to the hot-bath, where he received 150 strokes of the pump,\* chiefly directed to the shoulder and side affected.

Upon examination of the parts, and the patient, respecting the effects produced upon the system, during this last dangerous experiment; it appeared evident, that the force of the falling column of water on the inflamed surface, while he was labouring under a symptomatic fever, occasioned faintness and other unfavourable symptoms, which had nearly proved fatal to him during the operation.

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\* The degree or quantity of the application, improperly denominated dry pumping, is measured by the number of times the handle of the pump is raised and thrust down while the patient is exposed to the stream of the water.

It has already been observed, that the appearance of the tumour, when first examined, was comparatively small and circumscribed, occupying chiefly the articulation of the *humerus*. But the mechanical violence of the pump, by adding to the stimulus, and relaxing the solids, occasioned an extensive process of the secretion of the fluids into the surrounding cellular membrane, which greatly increased its size; insomuch, that the whole surface, from the top of the shoulder to the spine of the *ileum*, was in a state of inflammation, irritation, and extreme pain, from which he had not enjoyed a single interval of ease during the night. His skin was hot and dry, pulse 128, with head ach, sickness at stomach, and diarrhœa.

The pain being thus extreme, with increase of tumour, sense of weight and throbbing, the parts more softened and pointed; it now became necessary to hasten the effused fluid into pus, as well as to relax the surrounding integuments, with a view to promote the most favourable directions of the abscess. For this purpose, fomentations were ordered to be used twice a day, to alleviate the pain, and emollient cataplasms applied warm and sufficiently large to cover the parts. And as danger was evident, he was desired to comply strictly with the injunctions which were given, to keep himself quiet, and at home.

The saline mixture with the *pulvis antimonialis* was continued, till the febrile symptoms were removed; and to check the diarrhœa, the following medicine was ordered.

R. Pulveris cretæ compositi cum opio ʒij. Tincturæ cinnamomi compositæ ʒj. Aquæ menthæ sativæ ʒv. M. sumat cochl. ij. ampl. post singulas sedes liquidas.

To procure rest, and a copious diaphoresis, the following was prescribed.

R. Tincturæ opii guttas lxx. Spiritus ætheris vitriol. comp. Vin. antimonii tartarisi aa. ʒj. Aquæ pimento dilutæ ʒiʒ. f. haust. quotidie nocte sumendus.

The 25th during the night he perspired freely, and next morning the febrile symptoms were considerably abated. The saline mixture above mentioned was repeated, which kept up a gentle perspiration, and the diarrhœa was soon removed by the cretaceous mixture.

During the remainder of this month, he suffered much pain in the right shoulder and side; and notwithstanding the most cautious method of treatment, to which he submitted with great resolution and perseverance, the symptomatic fever frequently returned, attended with profuse sweats, and he became so much emaciated, that every attempt

tempt to move himself in bed occasioned much pain, perpetual anxiety, and restlessness. And although opium was exhibited in uncommonly large doses, yet want of sleep rendered his situation truly deplorable.

His appetite, nevertheless, was good; wine, broths, and jellies, were added to his diet, and the maturation of the abscess was promoted by every possible means. But still it did not point to any particular part.

In this situation he remained till the 2d of November, when there appeared an evident fluctuation of *pus*. It was therefore my opinion, that the tumour should be immediately opened, and a surgeon requested to attend for that purpose. But, dreading the operation, the patient refused to see any other professional gentleman. Having met the apothecary next morning, who observing the magnitude of the abscess, he declined opening it, being apprehensive that the patient might sink under the immensity of the discharge. I therefore determined to perform the operation myself, which was immediately done with a scalpel, at the lower and most depending part of the tumour, where it pointed about four inches below the right breast. The quantity instantly discharged was upwards of four quarts, of yellowish, opaque, thickish, and almost inodorous fluid; and it may be supposed, that, at least a pint and a half issued from the orifice for several days following.

After the abscess was opened, the violence of his pain began sensibly to diminish, his pulse became softer and more regular, and partial remissions of fever ensued; I then ordered the *decoctum corticis Peruviani*, with the *conf. aromat.* and the *acid. vitriol. dilut.* Of this mixture a tea-cup full was taken every three or four hours, as his stomach would bear it. And good effects were obtained in procuring rest, by means of opium combined with some grateful aromatic.

About the 6th, the patient seemed to regain strength, so that he was enabled to walk from his bed to the fire, and sit up for several hours in the day. His appetite was equal to what it had been when in health. And he thus continued mending about a fortnight, when he suddenly complained of pain in his loins and hips, (owing to cold,) which again confined him to his bed. The first week after the tumour was opened, the discharge was profuse, thin, and putrid, excoriating the edges of the aperture, destroying integuments, and bringing along with it considerable portions

portions of sloughy cellular membrane, which sometimes choked up the opening, and obstructed the drain.

The integuments of the right side were œdematous, detached from the ribs and spine, and in some parts had the appearance of an empty bag; in others there was an evident fluctuation of pus, apparently in a state of maturation. And as there appeared to be a channel, or communication, between the different cysts, I had therefore reason to suppose, that the whole would be collected, and form one abscess of considerable extent.

The 15th he was suddenly seized with a pain in his left side, cough, and difficult respiration. I prescribed nitre with camphorated tincture of opium, to promote expectoration; a blister was applied to his side, and the following mixture, which I have often found of eminent service in relieving those distressing symptoms.

R. Ammoniacæ præparatæ ʒiſs. Aquæ puleg. ʒij. Aquæ pimento dilutæ aa. ʒiij. Sacchari purificati ʒiij. Olei olivæ ʒj. M. Sumat cochl. ij. ampl. quarta quaque hora.

By using the above medicines for two or three days, his cough was much better, and he continued the bark mixture as before. And to procure rest, the opiate was gradually increased to upwards of half an ounce of *tinct. opii cum mist. camphor.* ʒjß. *Spt. ather. vitriol. comp. guttas lxxx. singulis noctibus.*

Another large abscess having formed on the right side, about four inches above the spine of the ilium, it was opened on the 19th, whence issued nearly five pints of well digested pus. On the morning of the 21st, a tumour, of considerable size, was observed on the lower part of the sternum, near the *cartilago ensiformis*; this was opened on the 25th, and discharged about two quarts.

The right shoulder was much inflamed and painful, and two days after, an abscess pointed about five inches below the right breast, which burst in the night, and about two quarts of pus were supposed to have issued from the orifice. This continued open near a week, during which the acrid humour destroyed a considerable portion of the surrounding integuments.

The 29th, an abscess of uncommon magnitude appeared between the shoulders, resting upon the superior vertebra of the back. This was so extremely painful that the patient could not for forty-eight hours find ease in any situation; he was therefore supported by pillows, in a supine posture. This tumour was opened the 6th of December,  
and

and evacuated upwards of four quarts of fluid, of a purulent consistence, tinged with blood, and the orifice was closed three days after. When another abscess (being the fifth) came to suppuration upon the *lumbar vertebra*, between this last and most of the former, there was a perceptible communication. The 17th it was opened, and discharged about four pints and a half of pus tinged with blood.

About this time his cough returned, with oppressed respiration, pain in his side, and diarrhœa; skin hot and dry. In order to promote expectoration, the following decoction was directed; and, to relieve the purging, he occasionally took two spoons full of the cretaceous mixture.

R. Radicis senekæ contusæ, ʒß. Aquæ fontanæ, lbiss. Decoque ad libi. et cola.

R. Supra præscript. ʒv. Aquæ ammoniæ acetatæ ʒij. Spiritus pulegii, ʒi. M.

During the night he had several hours refreshing sleep; his cough easier, expectoration less difficult, the pain in his side abated, his pulse soft and less frequent, with a gentle perspiration, and his urine deposited a considerable sediment.

The patient having taken the bark for some time, as often, and in as large-quantities, as it could be given with safety, he now became averse to that medicine in any form whatever. I therefore ordered the *decoctum sarsaparillæ cum pulv. ejusdem, dosis, libra dimidia, ter quotidie*, and recommended a milk diet to correct the acrimony of the purulent discharge.

The symptomatic fever, however, continued with fewer remissions. The lower extremities became anasarcaous, with a tendency to colliquative sweats, and considerable emaciation. And, although the discharge from the last abscess had totally ceased, it was nevertheless obvious that the patient lost strength daily. His pulse was frequent and tremulous, varying from 120 to 130, upon the slightest exertion or agitation of body.

Under these circumstances, I urged him to resume the bark. Collections of pus doubtless implies a certain degree of inflammation, but the accompanying symptoms prove it to be of that irritable kind arising from an unequal determination of the blood attendant on great debility. In such cases, therefore, the use of the bark is admissible, at the same time that our best endeavours should be exerted to support and strengthen the system by means of other powerful tonics.

(No. 67.)

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Some have affirmed, that the Peruvian bark has been known to occasion difficult respiration in such cases, and on that account considered in the light of an uncertain and hazardous remedy. Authorities, however, are not wanting in favour of this remedy, when prudently administered. Besides, Morton, who extols it highly, we have the testimony of Sir John Pringle in its favour. He remarks, that he had frequently given three or four spoons-full of decoction of bark twice a day, without observing that it heated the system, or obstructed the breathing; but, on the contrary, that it had good effects when the patient complained of low spirits and weakness.\*

If the quantity of the remedy used by this author be thought too inconsiderable to afford any conclusion in its favour, it may be proper to refer to an account of several very alarming cases of pulmonary affections successfully treated by a more liberal exhibition of bark some time ago, published in the Medical Communications.†

Catarrh, a disease much connected with consumption, may be also adduced in support of the utility of the bark in cases of suppuration. Chronic catarrhs are sometimes extremely troublesome, by which the patient is considerably reduced, and it becomes necessary to employ the bark with a view to strengthen the constitution and diminish the discharge, by increasing the tone of the vessels distributed to the mucus membrane of the trachea. This may be further illustrated by a late author of reputation, who has written on the *Materia Medica*.‡

As the patient could not be prevailed upon to continue the bark, and as he was daily losing strength, his cough at times troublesome, respiration somewhat difficult, the lower extremities bloated, and a slight degree of anasarca extended to the rim of the belly; on the 27th, Dr. A. Fothergill,

\* *Army Diseases*, Third Edition, p. 164, Note.

† See *Medical Communications*, Vol. 1, p. 260.

‡ "Binos ipse ab empyemate chinchina (i. e. cort. Peruv.) curavi. Quo magis sputa fiant, eo certior cura. In phthisi pulmonali sapè quidem præclara præstat, sapè autem nihil efficit. Quando apthæ accesserunt, symptomaticæ in hoc morbo, evidenter nocuit, nisi sputa suppressisse diceret. Certè, ubi sputa in phthisi nimis abundant, cortex indicatur; si verò, cum oppressione pectoris, subito diminuantur, cortici non inhaerendum. Nullam vidi noxam ex moderata dosi chinchinæ quotidie sumpta in phthisi, etiamsi sanguis, per venam sectam emissus, crustâ inflammatoria obductus subinde fuit." Vide *Bergius Materia Medica*, tom. 1. p. 109.



Fothergill, an eminent Physician in this city, visited him at my request, and the following medicines were directed.

R. Myrrh. opt. ʒi. G. oliban. ʒij. Syr. balsam. q. s. ut f. pil. xx. capiat. iij. Nocte manequa cum haust. infus. sasafraſ tepid.

R. Tinct. opii camph. ʒi. capiat cochl. ij. minim ex haust. infus. sasafraſ. post ſingul. dos. pilul.

Having taken the above medicines for a ſhort time, they ſeemed to have a good effect, but were afterwards changed for the bark in ſubſtance, of which he took a drachm three or four times a day in port wine, and perſevered in the uſe of it about three weeks. When, notwithſtanding his habitual exceſs in drinking, by the middle of January, 1802, he was perfectly reſtored to health, except a ſlight degree of lameneſs about the articulation of the ſhoulder.

Although this patient had no apparent ſymptoms of the diſeaſe when he complained of the pain about his ſhoulder, yet there cannot be a doubt that it aroſe from venereal infection. For, it is well known, that inflammation from the above cauſe has a tendency to ſuppurate, and generally does ſo, unleſs the virulence of the diſorder is deſtroyed by mercury, or a revulſion is produced by ſome other diſeaſe, or by evacuant medicines.

The quantity of purulent fluid, clearly aſcertained to have been diſcharged, on opening the abſceſſes, which ſucceſſively formed (as above deſcribed) was upwards of *eighteen quarts*, excluſive of that which was removed with the dreſſings and by other means.

As ſupplying many of the inhabitants of this city with milk, this man is well known; and he lately informed me, that ſince his recovery as abovementioned, he has enjoyed an uninterrupted ſtate of health, and is now entirely free from lameneſs.

*Bath, Auguſt 14, 1804.*

#### EFFICACY OF GALVANISM IN CASES OF HYDROPHOBIA.

**SOME** experiments have been made at Turin, which prove the power of galvanism in the treatment of hydrophobia.

On the 19th of June, 1802, a man, aged 45 years, was bitten on the thumb of the right hand by his own dog, which was mad. On the 20th of Auguſt following, he

went to consult professor Rossi, as he had been seized with terror at the sight of water, which had produced convulsive movements in the muscles of the lower jaw. The patient informed M. Rossi, that, during the first twenty-five days he had felt no pain, excepting in the part bitten; that he had, in consequence, cauterized it himself several times with boiling oil and the actual cautery, in order to excite a long suppuration; that on the 14th of July he felt a very acute pain in his neck, from which he was relieved by some internal composing medicines, which a professional man had prescribed; that, some days afterwards, being siezed with such a violent dizziness as to make him fall down, an emetic was administered, which gave him very great relief; that, in a few days, he was attacked with pains in most of his joints, but particularly in the vertebræ of the neck and back; that finally, different remedies had been prescribed without success, till the day when his fear of the water had made him resolve to consult him.

M. Rossi having reason to believe, that madness would soon manifest itself in this man, as he already felt its symptoms, resolved, without loss of time, to have recourse to galvanism. He composed a pile of fifty couple, with disks of pasteboard wetted with a solution of muriate of ammonia. He established the mediate circle between the end of the thumb bitten and the commencement of the spinal marrow, and then between the tongue and the lower extremity of the spine; but the patient could not endure the operation on his tongue, without being excited to bite. He then placed him barefoot on the ground, which had been wetted with water, but he could not bear the impression made by that fluid. He was then removed to another place, and by means of a long conductor, which was carried from the end of his toes to his mouth, the galvanisation was continued only two minutes, because he threatened to bite. M. Rossi then fixed the immediate circle along the spinal marrow, and repeated the galvanisation till the patient fell into a deep swoon, which was succeeded by a profuse perspiration. A quarter of an hour afterwards the patient rose and was able to go home, accompanied by some friends, who were charged to give an account the following day, of what should happen in the interim.

The day following he returned by himself, saying that he was cured; for he had drank water with but a very slight degree of terror, and had taken a cup of chocolate. The galvanic operations were, on that day, repeated. He appeared

appeared again on the fourth day, declaring that he experienced no difficulty either in eating or drinking, and refused to be galvanized. M. Rossi would not insist on performing the operation, on account of the excessive dread of galvanism testified by the patient; he only invited him to return the following day, but which, he however neglected to do till after an interval of six days. He then related, that, the preceding night, he had been seized with convulsive movements, and had been disturbed by frightful dreams. He likewise mentioned, that he frequently had an inclination to bite his clothes, and that he experienced great difficulty in drinking. He again submitted to the galvanic operation, which was performed in the manner above described, in the presence of M. Vassali Eandi, and several other persons. No symptom appeared from that time till the 14th day afterwards. During this interval, the patient came every day, of his own accord, to be galvanized, and received pleasure from it equal to the aversion he had before testified. On the fourteenth day he complained of pains in his joints, but M. Rossi perceiving that they were caused by the excessive use of galvanism, desisted from all the operations, and on the twenty-seventh day the pains went away. A few days afterwards, the patient again desired to be galvanized: his request was complied with, and, on the third day, the same pains returned; the operations were then suspended. Since that time, the patient has never experienced any symptom of his former complaint, and has enjoyed an excellent state of health.

The second observation was made on a hair dresser, who was bitten by a mad dog on the chin and the right leg, and who was sent to M. Rossi by M. Charron, Commissary General of Police, the fourth day after the accident, to be admitted into St. John's Hospital. The patient having employed no kind of remedy, M. Rossi thought it advisable to subject him to the ordinary treatment. He was therefore cauterized with the actual cautery on the two places where he had been bitten, and for twenty-six days after his admission into the hospital no other remedy was employed. Thirty-one days after the bite, the patient having complained that he could not sleep, opium was administered, but, instead of composing, it seemed only to increase his inquietude and agitation. The dose was increased to two grains, but without producing any benefit, and the patient even began to feel an obstruction in his throat. M. Rossi then proceeded to galvanise him, in the manner described in the preceding case. The galvanisation was repeated

every second day till the forty-sixth, when the patient appeared to be perfectly well. He left the hospital on the fifty-fourth day, and since that time has had no relapse.

*Account of Diseases in an Eastern District of London,  
from July 20 to August 20, 1804.*

| ACUTE DISEASES.     |            |                        |           |
|---------------------|------------|------------------------|-----------|
| Pneumonia           | - - - - 3  | Hysteria               | - - - - 5 |
| Hepatitis           | - - - - 2  | Hypochondriasis        | - - - - 4 |
| Rheumatismus Acutus | - 7        | Chlorosis              | - - - - 6 |
| Cholera             | - - - - 6  | Scrophula              | - - - - 3 |
|                     |            | Herpes                 | - - - - 4 |
| CHRONIC DISEASES.   |            | Rheumatismus Chronicus | 12        |
| Tussis              | - - - - 12 | PUERPERAL DISEASES.    |           |
| Dyspnœa             | - - - - 7  | Peritonitis            | - - - - 3 |
| Tussis cum Dyspnœa  | - 14       | Menorrhagia Lochialis  | - 5       |
| Phthisis Pulmonalis | - 6        | Ephemera               | - - - - 5 |
| Hydrothorax         | - - - - 4  | INFANTILE DISEASES.    |           |
| Ascites             | - - - - 3  | Aphthæ                 | - - - - 4 |
| Scirrhus Uteri      | - - - - 1  | Herpes                 | - - - - 3 |
| Prolapsus Ani       | - - - - 2  | Ophthalmia             | - - - - 3 |
| Cephalalgia         | - - - - 7  | Diarrhœa               | - - - - 4 |
| Gastrodynia         | - - - - 6  |                        |           |

The autumn now advancing, the diseases peculiar to that season begin to shew themselves.

Several instances of cholera have occurred. This disease, which most frequently makes its appearance in the autumnal months, has been attributed to effects produced on the hepatic system during the heat of the summer. These are more particularly observable when a copious fall of rain has succeeded a very warm temperature of the atmosphere.

As this disease is endemic in the warm countries, it is natural to ascribe it to an increased degree of heat, and it has accordingly been observed to prevail more or less in proportion to this.

The more immediate cause of this disease is to be found in the morbid action of the liver.

Dr. Saunders supposes, from the quantity of bile secreted, and the rapid manner in which it is poured into the duodenum, "that there is not time sufficient for a perfect secretion, but that the fluid is somewhat of an intermediate nature between blood and bile;" and that "a considerable quantity

quantity of red globules escape, unchanged, from the capillary vessels into the *pori biliarii*, and, uniting with a portion of bile, are carried by the hepatic ducts into the duodenum."

In the treatment of this disease, emetics and cathartics seem unnecessary, unless, indeed, by too early or too free a use of opiates, the evacuation from the intestines has been prematurely checked, and great pain in the bowels ensues in consequence of this, when the use of the latter may be highly necessary.

Although too early an use of opiates may prove injurious, the well directed use of them is highly salutary, especially in those cases where spasms of the lower extremities prevail. It is highly proper throughout the disease to dilute the contents of the stomach and intestines by the use of some emollient fluid, and also in some cases to throw up a glyster.

## CRITICAL ANALYSIS

OF THE

## RECENT PUBLICATIONS

ON THE

DIFFERENT BRANCHES OF PHYSIC, SURGERY,  
AND MEDICAL PHILOSOPHY.

*Medical Report of Cases of Inoculation and Re-inoculation with Variolous and Vaccine Matter: with some Cases of casual Exposure to Small-Pox Contagion, subsequent to Vaccination.* By JOHN ROLLO, M. D. &c. &c. 8vo. pp. 23. London, 1804.

It appears, by this short Report, that Mr. Goldson's pamphlet had produced no small degree of doubt respecting the permanent efficacy of vaccination even in the mind of Dr. Rollo. We conclude, therefore, that it has produced more than doubt in many minds far less enlightened, and less capable of judging of medical evidence than he is. We rejoice, however, for the occasion which threw a subject, so interesting to the public, into hands so well qualified for its investigation. Dr. R. appears to have availed himself of every circumstance which could render his experiments decisive of the question at issue. The season of the year, the activity of the

small-pox matter employed, attention to its effectual insertion into the arms, and, lastly, by inviting a considerable number of respectable practitioners to witness the progress of the cases. The result of these experiments, and many others, instituted with the same view, in various parts of the kingdom, we conclude, has set the matter at rest for some time at least.

"So far as our cases go," says Dr. R. "we could hardly have refrained from drawing individual inferences; but this, and any other explanation necessarily arising from them, we at present decline. Except in observing, that, from the whole of this report, the subsequent remarks so strongly arise, that we think it proper to subjoin them: namely, that the vaccine inoculation resists the action of the variolous disease; that when this has been *apparently* diminished as a preventive power, the variolous disease has been much milder, and less compleat; but how far time may farther influence the vaccine power, time only can decide; though at present it remains entirely in favour of vaccination, as deducible from our report."

"It is with the greatest satisfaction to us, that it will be perceived, that of the five hundred and fifty we have vaccinated, not more than thirteen have been in any degree affected by re-inoculation, or casual exposure to variolous matter; and in these, any disease induced has been extremely mild, and some doubt may arise whether it was really variolous constitutional affection or not. It is also to be recollected, many of the remaining five hundred and thirty-seven cases of cow-pock have been occasionally exposed to variolous influence without effect.' Therefore, so far as our experience extends in vaccination, it is completely supported. From every analogy, it is reasonable to suppose that time will establish the demonstration of its full and permanent power."

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*Minutes of some Experiments to ascertain the permanent Security of Vaccination, against Exposure to the Small-Pox. To which are prefixed, some Remarks on Mr. Goldson's Pamphlet. With an Appendix, containing Testimonials and other Communications from many of the most respectable Medical Men in this Neighbourhood.* By RICHARD DUNNING, Surgeon, and Secretary to the Dock Jennerian Institution. 8vo. pp. 120. Plymouth.

THE enquiry excited among Medical Men throughout the British Empire by Mr. Goldson's pamphlet, seems likely to obtain for them, in the world at large, a character for vigilant observation on the important subject which does such honour to our nation. The discussions it has provoked, and the train of experiments it has induced, will be every where attentively regarded; and when the alarms which its extensive circulation has occasioned shall have subsided, the Jennerian inoculation must be universally received with increased confidence. Like our native oak, the flourishing  
plant

plant (vacciola) shall become but more firmly rooted by the blasts which may have threatened to overturn it.

Mr. Dunning says, very liberally, of the work which, at least, has given rise to very valuable observations, "Mr. Goldson's pamphlet, I fear, is much too well written not to excite a very general interest; and I lament to add, not to occasion a vast deal of misery and distraction in many thousands of families; at the same time I am most ready to admit, and I admit it with great satisfaction, that his observations, &c. are written apparently with too much candour for me to doubt a moment his willingness fully to retract them, whenever he shall see occasion to do so. Indeed, the whole *Tenor* of the pamphlet carries conviction to my mind, that the author is not a bigot, who, if wrong, will not be convinced."

Mr. Dunning, as soon as he had read Mr. Goldson's pamphlet, availed himself of the earliest opportunity to set on foot the tests of variolation and exposure to the fullest infection of the small-pox that could be devised; in which he had the concurrence of Doctors Remmet, Woolcombe, and May; Messrs. Little, Fuge, Smith, Lower, Penkivel, Bone, Veitch, and Sargent. Many of his little patients, whom he had vaccinated at different periods in the course of the last four years, had been constantly breathing for many weeks a highly variolated atmosphere. He had vaccinated more than a thousand subjects since the latter end of 1799; and as he had never met with a single instance of subsequent small-pox, though many of them had been subjected to variolation, and many constantly and fully exposed to casual infection, nor known a case in the practice of any surgeon in his town and neighbourhood, he was naturally convinced of its permanent efficacy.

We pass over upwards of thirty pages, as being principally theoretical, and in some parts perfectly hypothetical, in order to come to the facts, in which all the world is concerned.

Mr. Dunning, a fond parent, had his child, ten months old, whom he had vaccinated eight months before, inoculated (January 23, 1802) from a woman ill of the most malignant small-pox, of which she died three days afterwards. "An early and considerable local affection on the arm took place, and gradually progressed till the seventh or eighth day, when it began to shade, and in a few days dried off. This inoculation was neither attended with the slightest constitutional effects, nor followed by the smallest vestige of the small-pox. This child he also inoculated again for the small-pox in July 1804; and, on this occasion, as well as the former, had the child taken into the close room of the sick, thus exposing it to the contagion of the disease as well as the infection by the lancet.

At the time of the latter inoculation Mr. Dunning, had another son also submitted to the operation. "The eldest boy is twelve years old, and had been inoculated more than eleven years before, and suffered a good deal from the small-pox; the susceptibility of  
small-pox

small-pox in our family is very remarkable." The effect of the variolous inoculation was nearly the same on the younger child as it had been two years and a half before; on the elder, a slower but rather greater effect of the same kind was produced.

"The benign cow-pock," says the author, has now, in the person of my youngest child, completely and unequivocally resisted, *at different and distant periods*, the poison of small-pox." Almost immediately on the effect of the inoculation on this child being ascertained, it was discovered that children were dying of scarlatina within a few yards of the house, when Mr. Dunning in a few hours removed his family from the village; but the infant was already infected; and on this he observes, "No circumstance can more strongly mark the susceptibility of contagion in this child than his taking on so readily the scarlatina, the previous inoculation having gone through all its stages three days before the seizure: this circumstance places, if possible, in a more striking point of view, the unsusceptible state of the child's system, with respect to the poison of the small-pox; and indeed, although it has been an afflicting circumstance to the child and my family) gives an additional weight to the experiments which I hope and believe the utmost ingenuity of any man, the most adverse in the world to the cow-pock, cannot lessen."

In addition to the evidence contained in Mr. D's Minutes, he has given a valuable body of correspondence and extracts, all tending to establish the same satisfactory conclusion as the Minutes had done. We here also find occurrences and cautions similar to those lately laid before the public by Mr. Ring.

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*Surgical Observations, containing a Classification of Tumours, with Cases to illustrate the History of each Species; an Account of Diseases which strikingly resemble the Venereal Disease, and various Cases illustrative of different Surgical Subjects. By JOHN ABERNETHY, F. R. S. &c. &c. 8vo. pp. 263. 1804.*

[ Continued from pp. 176—179. ]

After this, the author slightly mentions another *genus* of tumours, which he calls osseous, and illustrates with a case. The division concludes with the following observations:

"Vascular tumours also may doubtless become converted into a substance resembling cartilage, like those found in joints; and their hardness might then exclude them from the genus sarcoma. I have not however met with such instances, though it is not very uncommon to find a substance resembling cartilage intermixed with the other vascular substance of a sarcocele of the testis.

"The diseases which I have been describing may be considered as edifices which are built up by diseased actions, and in which those diseased actions continue to reside. The actions themselves do not admit of examination, though the structures do which they erect.



erect. Therefore, as Dr. Baillie has observed, it is by an examination of diseased structure that we must be slowly led to a knowledge of diseased actions. It does not follow as a certain consequence, that similar diseased actions will, in every instance, produce precisely the same diseased structure; though it is highly probable that they will do so in general. This observation would diminish our surprize if, in some rare instances, we found cancer existing where a cancerous structure was not strikingly manifest; or if, in others, a structure like that of cancer, was observed where no cancerous actions were apparent. The scirrhus tumours, which form beneath the peritoneal covering or lining of the uterus, have something of the structure of cancer, and yet they are not cancerous. In all cases where tumours are formed we must suppose an increase, and, in some degree, a disordered action of the vessels which form them, but, in many these actions possess but little diseased peculiarity. As in every case of growth, in the re-production of destroyed parts, the gelatinous substance of the blood is first deposited, and afterwards rendered vascular, therefore I have considered a tumour formed in this manner as one of the most simple kind, and possessing the least of diseased peculiarity; but I am aware that I may have included under this general character tumours of essential different natures. In the adipose sarcoma there must be some peculiarity in the arrangement and actions of vessels which form this tumour; but it must be accounted a natural rather than a morbid peculiarity. The pancreatic sarcoma, I should suppose, differed but little from the first species. It may be considered as a new growth characterized merely by the peculiarity of its appearance, in consequence of its being separated into many distinct parts, which sometimes cohere by a looser kind of texture, and sometimes are separated by a firmer substance. The connecting medium appears like the thickened cellular substance of the part in which the newly organized matter is formed. Indeed, I have sometimes pressed out the separated portions of this substance from the connecting medium which environed them. In the mammary sarcoma I suspect some diseased peculiarity to exist, as has been mentioned in speaking of that subject. In the tuberculated sarcoma the predisposition to that disease seems general on the part of the constitution. In the medullary sarcoma the disease seems local, in the first instance, and propagated by means of the absorbing vessels to their glands, and frequently in a course retrograde to that which the absorbed fluids would naturally take; but in the advanced state of the disease the morbid disposition appears to be general. In carcinomatous sarcoma the disease appears to begin in a point or small district, and to extend in every direction, as rays do from a centre, affecting every surrounding part whatever may be its nature. The diseased actions also, though they may be at times more violent or more tranquil, never cease. This disease is also extended through the medium of the absorbing vessels in the direction which the absorbed matter would naturally take."

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Our readers will lament with us that this language, how well so ever the facts may be supported, is much too figurative for practical purposes. But, lest we should be accused of partiality, we again refer the reader to the work itself.

The next section is on diseases resembling syphilis. This is introduced with the following well deserved tribute to the memory of Mr. Hunter.

“ Having thus ventured again to appear before the public, I shall take the opportunity of exciting its attention to some cases which have occurred to me of diseases resembling syphilis. Mr. Hunter; in his excellent Treatise on the Venereal Disease, has related several cases supposed to be of that nature, and some of which were certainly not so, as they got well without mercury; but in the greater number the employment of this medicine rendered their nature doubtful. Mr. Hunter also, who was as cautious in drawing conclusions as he was accurate in making observations, expresses himself in many instances so diffidently on the subject, as, in my opinion, not sufficiently to impress the minds of his readers with the certainty, importance, and frequency of such facts. He concludes his observations by intimating, ‘ that undescribed diseases, resembling venereal, are very numerous, and that what he has said is rather to be considered as hints for others to prosecute this inquiry further, than as a complete account of the subject.’ As it has occurred to me very frequently to meet with such cases, and as the necessity for discriminating them from venereal diseases appears to me of the highest importance, I shall prosecute the subject by relating some unequivocal cases of diseases strikingly resembling syphilis, and which, however, were not so, provided it be admitted that syphilis does not spontaneously get well without the aid of medicine.”

This division of the work is principally made up of very instructive and important cases. It would be unjust to make any observations on the want of accurate discriminations, or that no arrangement is attempted. The author's object is evidently to impress on his readers a closer attention to that variety of sores which appear on the genitals, and of ulcers, spots or nodes, which attack other parts of the body, and are too indiscriminately confused with venereal complaints. In doing this, he has very judiciously selected some striking cases, which cannot fail to impress the young practitioner in a lively manner; to such we recommend the careful and repeated perusal of the whole; we shall only extract the following passage, as it does credit to the author's accuracy and candour.

“ With respect to sores that are not venereal, the difficulties of investigation are greatly multiplied. If a description cannot be given of venereal sores, it seems almost absurd to say any thing of those multiform sores produced by infectious matter, the qualities of which may be probably variously modified, and the effects of which appear equally liable to modification from peculiarities of constitution.

Yet

Yet in this intricate subject there are certain facts which can be distinctly observed, and deserve attention. Some of these sores spread by ulceration, and some by sloughing, of which instances are related in the first section of this paper. Even Celsus has described several species of sores which, as Dr. Adams has observed, we are acquainted with in the present day. I have never seen that phagedænic ulcer, which suddenly sloughs, affect the constitution: neither do I believe that surgeons in general have remarked it; those who regard all these sores as venereal, attribute the absence of secondary symptoms to the chancre having been removed by the sloughing of the surrounding parts. Yet in the case related by Mr. French in Mr. Hunter's *Treatise on the Venereal Disease*, secondary symptoms did occur from a sore of this kind, and got well without mercury. It may therefore, perhaps, be doubted whether this disease be not an aggravated form of the sore which sloughs more slowly, and from which the constitution is much more frequently affected. As I consider any observations that I have made on these sores to be incomplete and therefore not to be depended upon, and Dr. Adams having restricted the term Phagedæna to one kind of destructive sore, I feel more inclined to leave it as a generic term for all these sores, and to divide them into species according to their peculiar characters. Then we may describe them as ulcerating phagedænic sores, and sores which spread by sloughing. Again, the ulcerating or sloughing process may extend not in all but in particular directions, and the sloughs may take place from the edges or from the whole surface. As Dr. Adams has treated these subjects at large, I refer the reader to his book; but I will take upon me to describe one species of sore which frequently occurs, and is generally treated as venereal, but which I am convinced is not so.

“The sores alluded to generally break out in succession, and sometimes after a considerable interval of time; which circumstance, if remarked, would render it improbable that they arose from infection of the ulcerated part, since such sores would probably be contemporary. The ulcer is at first inflamed, and spreads ordinarily to the size of the finger nail: its circumference is thickened; it throws out new flesh, which rises above the surrounding skin; sometimes there is an appearance of several little cells or spaces in the interstices of the granulations, if they may be called so, owing to the whole ulcer not producing new flesh in an equal degree. These sores are slow in healing under any mode of treatment, and they generally get well in the same succession as they broke out. They sometimes form in a circle round the orifice of the prepuce, and cause a contraction in that part after they have healed. I do not mean to say that all sores occupying this situation are not venereal, but merely to state that sometimes after a gonorrhœa of the prepuce, either originally occurring there, or having happened by a metastasis of disease from the urethra, sores do break out in this situation at a remote period from the receipt of the infection,

fection, which are not venereal. They seem to be the consequence of an irritated state of the prepuce, from which there is sometimes a slight general discharge, like that which takes place when the gonorrhœa shifts its situation from the mouth of the urethra, and becomes the gonorrhœa of the prepuce. The glands in the groin sometimes swell from irritation in these cases, and generally subside again, though I have known them suppurate; but I never saw any secondary symptoms succeed to this species of ulcer.

"In the earlier part of my practice, in conformity to general rules, I used to give mercury in these ulcers to secure the constitution against infection, whilst I tried to heal the sores as speedily as I could by topical applications. Slightly destroying the surface with the argentum nitratum every second day, and dressing with the solution of zincum vitriolatum, were the local means which seemed to be most successful. An attention to the history of the disease, and frequent applications for advice from persons who had been severely and unavailingly salivated for the cure of this species of sore, soon emboldened me to abstain from the use of mercury, and I have never found, though I have met with a considerable number of instances, that I have in this respect acted wrong."

The last division of the work consists of *various cases illustrative of different surgical subjects*. It commences with injuries to the head, in which our author again instances several cases of fracture, for which the application of the trephine was unnecessary, and others in which it could not be attended with any advantage. They are related with his usual accuracy, and the inferences drawn are such as we might expect from Mr. Abernethy. The last case, though not strictly in point, is peculiarly important, for which reason we shall transcribe the whole.

"A man was gored in the neck by a cow. The horn entered by the left side of the cricoid cartilage, and penetrated as far as the vertebræ; it then passed upwards on the bodies of those bones, nearly as high as the bottom of the skull, afterwards it came out behind the angle of the jaw, exposing and in some degree injuring the parotid gland in its passage, and lacerating the skin of the face as high as the middle of the ear. In its course it had passed beneath, and torn the internal carotid artery, and all the primary branches in front of the external carotid artery. The former vessel was not however entirely rent asunder, so that the general course of the artery and its connection with the cranium remained in the usual state. Notwithstanding the size of the vessels which had been torn, they did not immediately bleed; the wound was therefore closed and bound up. The blood was soon observed to flow in streams down the neck, nor could any general pressure upon the wound prevent hæmorrhage. In this state the man was conveyed to St. Bartholomew's hospital, but he lost a large quantity of blood before his arrival.

"The patient was laid upon a bed, and before the wound was opened, one of the students firmly compressed the trunk of the carotid

carotid artery against the lower cervical vertebræ. We found upon the first inspection of the wound, that this pressure prevented any hæmorrhage; yet upon the occasional motions of the patient, and upon accidental variations in the pressure made on the vessel, the blood gushed from the bottom of the wound so suddenly and in such quantities as to prevent any accurate examination. The man was very unquiet; he complained much of the pressure, and was greatly distressed by a sensation of suffocation, which compelled him constantly to attempt to expectorate. Under these circumstances our first endeavours were to tie the more superficial arteries; but the edges of the wound being lacerated, the first ligatures which we endeavoured to make, tore away portions of the flesh, and did not secure the vessels.

“The situation of the patient became every moment more desperate, he really seemed choking, his extremities became cold, and his pulse was scarcely to be felt: his struggles also, which could not be controlled, made the pressure on the trunk of the artery very precarious. It was deemed necessary to enlarge the wound to get at the trunk of the carotid artery, and an incision was made between that vessel and the trachea, in a direction parallel to each of these parts. I had now the power of passing my finger beneath the trunk of the carotid artery; and of effectually compressing it between that finger, and my thumb which was placed opposite to it, upon the integuments of the neck.

“I had now leisure to examine the wound with my other hand, and felt that the pharynx had been separated from the vertebræ of the neck, and had fallen against the larynx: its irritation on that organ was probably the cause of the sensation of suffocation which the patient suffered. There did not appear any reason to believe that the pharynx was wounded; for though the patient was constantly spitting, the mucus was not mixed with blood. Finding that the moment I remitted the pressure on the carotid, the blood gushed out from so many orifices, and in such a torrent from the bottom of the wound, I resolved to pass a ligature round the trunk of the carotid at the part where I had been compressing it, and which was about an inch below its division. This ligature I thought might be made to serve as the tourniquet in amputation, for I could with it compress the artery so as to prevent the wounded parts becoming obscured by blood, and by slackening it I might gain information with regard to the situation of the ruptured vessels.

“Should it become necessary at any time to tie the carotid artery, I am convinced that it may be done without much difficulty or danger, even without an accurate dissection of the part. If the incision be made on that side of the artery which is next the trachea, where no important parts can be injured, as was done in the present instance, the finger can then be passed behind the artery so as to compress it. The vessel being sufficiently bulky and firm, to make its form and outline distinctly perceptible, a needle may then be passed behind the artery, as near as possible to that edge of

it which is next to the internal jugular vein; there can be little risk of wounding that vessel, or of including in the ligature the eighth pair of nerves which lies between them. In attempting to secure the carotid artery, I passed behind it in the manner described, a blunt hook with an eye in the point, and having previously introduced a ligature into it, I drew back the instrument and thus enclosed the artery.

“ When I compressed the vessel by tightening the knot of the ligature, I did it slowly, and with a watchful attention to the sufferings of the patient; for I cannot but suppose that had the nerve of the eighth pair been included, his complaints would have sufficiently denoted that circumstance. But the compression of the ligature did not seem to make the least difference in the general state of the patient, whilst it completely prevented the further effusion of blood. With a knife and dissecting forceps I then exposed the lacerated vessels, and found that the primary branches of the external carotid artery had been torn off from the trunk. By drawing upwards the ligature which encircled the trunk of the artery, I made the internal carotid tense, so that its course and ruptured state could be distinctly felt. The ligature on the trunk was slackened, and the gush of blood further confirmed the laceration of the internal carotid artery. I had now the alternative of securing the ligature, which I had already made on the trunk of the vessel, or of tying the branches separately. I preferred the former, and it should be observed that the man had now lain ten minutes or more, without any blood being carried to the brain by the left carotid; and during that period he had recovered from his extreme faintness, appeared perfectly sensible, and as well as could be expected in a person, considering that he had lost so large a quantity of blood. The ligature being now made secure, the wound was brought together by stripes of plaster; and in this state warm milk was given to the patient to drink, in order to learn what would be the effect of his efforts to swallow, and to ascertain, as far as possible, whether there was any wound in the pharynx or œsophagus. The patient swallowed about a quarter of a pint of this fluid with difficulty, and with the frequent excitement of coughing. No milk however came through the wound, and I concluded that all the difficulty of deglutition arose from the unnatural state in which the muscles of the pharynx were placed, in consequence of their detachment from the vertebræ. These circumstances happened between four and five o'clock in the afternoon, and when I saw the patient again between nine and ten, his state seemed greatly amended. He had several times taken warm milk, and the difficulty of deglutition had abated. His pulse was now moderately full and strong, and not very frequent. It therefore appeared that the apparently dying state of the man, which at one time had alarmed us, proceeded rather from the sudden discharge of blood, than from the quantity, however considerable, which had been lost. The patient also appeared tranquil, and perfectly rational, and though prevented

prevented from speaking much, he expressed himself satisfied in his situation.

“ On the whole I was led to form a favourable expectation of the progress of the case, as far as related to the effects which a ligature on one carotid would have on the economy of the brain. I was next morning mortified to learn that the patient had been unquiet, and feverish during the night, that he had become delirious, that he had been several times affected by slight convulsions, which had increased; and that when liquids were now given to him, they passed through the wound, and he could scarcely swallow any thing. The pulse of the patient was now about 130 in a minute, and hard, and his skin was hot. He lay inattentive to external objects, but probably not insensible, for the pupils of his eyes were contracted; and when the lids were opened, in order to examine them, he shut them quickly, and as it were, impatiently. It had been remarked, that the left side of the body was more convulsed than the right.

“ As we had it not in our power easily to give medicine, I introduced a small hollow bougie through the right nostril into the œsophagus, and immediately injected half a pint of milk and water, and sixty drops of tincture of opium; that I might learn the effects of that medicine under the present circumstances. The patient shortly after broke out into a most profuse sweat, and the convulsions were quieted by the opium. The convulsions when thus mitigated by opium, might be described as violent tremors of the left side of his body, but the right side remained motionless; to which curious fact I particularly attended. I placed his right arm across his breast, from which situation it did not afterwards stir. I could not, however, perceive any distortion of the face to the opposite side, and the pupils of both eyes were equally contracted. When I saw the sweat break out on the taking of opium, and the nervous irritation diminished by its operation, I was then more forcibly struck than I had been before with the similarity of this patient's situation to that of a person suffering from the effects of concussion of the brain, some time after the accident, when the inflammation often succeeding to it, had begun to take place.

“ I even questioned if it might not be right to take blood from the temporal artery, which was seen beating violently. I thought however the general opinion would be against such practice, and I only applied a blister to the head. Twenty drops of tincture of opium were directed to be given to the patient every third or fourth hour, with a view to mitigate the convulsions, which it appeared to do. Milk and water was also occasionally given, in proportion to the degree of perspiration. No remarkable change of symptoms took place, but the strength of the pulse gradually declined, and at ten o'clock at night he had a severe convulsion fit, and immediately after died. His death happened about thirty hours after the ligature was made on the carotid artery.

“ The body was examined on the following day. The brain appeared to have suffered a considerable degree of inflammation.

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The vessels of the pia mater appeared as if they were injected, and in many places upon the surface of the convolutions of the cerebrum, there even seemed an effusion of blood producing that appearance usually termed bloodshot. There was a very considerable deposition of gelatinous substance between the tunica arachnoidea, and the pia mater. The vessels passing through the substance of the brain, though fuller than common, were not particularly turgid. A considerable quantity of water, of a light brown colour, and slightly turbid appearance, was found in the ventricles, whilst the firmness of the sides of those cavities sufficiently indicated that the collection had not preceded the accident. On examining the neck, the carotid artery was found to be the only part included in the ligature. The superior thyroideal, lingual, and facial branches of the external carotid, were torn off from the trunk, and the internal carotid was rent across, as has been already mentioned.

“ Neither the trunk of the eighth pair of nerves, nor the great sympathetic, nor those of the tongue, appeared to have suffered injury. The superior laryngeal and the descending branch of the ninth pair were the chief nerves injured by the accident. These circumstances are mentioned, to enable the reader to form his own judgment on the probability of the symptoms which occurred being produced by nervous injury or irritation.

“ That the disorder and death of this man is not to be attributed to the quantity of blood which he had lost, appears clearly to me, not only from the degree of plenitude and power of the vascular system which remained, but because I had seen many patients in the hospitals, who had divided most of the primary branches of the external carotid artery in the attempt at suicide: and who, after surviving a few days, perished in consequence of the loss of blood which they had sustained, but with a train of symptoms very different from those which occurred in the present instance.

“ Some persons may perhaps be inclined to attribute inflammations of the brain to nervous injury or irritation. I have taken notice of all the injury discoverable by dissection, and have further to observe, that we frequently see larger nerves lacerated in wounds without the production of such symptoms; and the tranquil state of the patient till the inflammation of the brain came on, opposes such an idea. Upon reflection, I can form no other opinion of the case than that which first struck me, which is, that though the stopping the supply of blood to the brain did not for several hours produce any apparent derangement in the functions of that organ, yet such a state was gradually occasioned by it, and which was attended like the effects of concussion of the brain, with inflammation. It further appeared, that when the combined effects resulting from the derangement, and the inflammation, were manifested together, the state of the patient much resembled that of a person who had suffered concussion.

“ The different states of the two sides of the body ought not I think to pass without further notice. Although the right side  
could



could not be positively said to be paralytic, yet in my opinion it approached to that state.

"It has been already observed, that a double construction might be put upon the symptoms, yet as the inflammation of the brain was equal on both sides, we might naturally expect the whole body to suffer equally. Should the state of the right side have been, as appears most probable, an approach to a state of paralysis, it would surely be considered as peculiarly curious. An effusion of blood in the left hemisphere of the brain would affect the opposite side of the body in the same manner, that cutting off the supply of blood to the left side appears in this instance to have done. I forbear to speculate on this subject; the fact which I have mentioned seems to deserve notice, and though at present it must stand alone, it may in future receive addition, and, when thus supported, be applied to some useful purpose in physiology.

"I have thought it right to record this case, not merely because it is curious, but because it affords some useful practical hints, as to the conduct to be pursued when a person has divided the large primary branches of the carotid artery in an attempt at suicide. It may be allowable also to mention, in relation to this latter subject, the great advantages which appear to me to arise from the immediate introduction of a small elastic catheter, passed through the right nostril, down the œsophagus, nearly as far as the stomach, in the manner practised by Dussault, in the cure of a person wounded by a pistol ball.

"A patient in such a state is not under the necessity of frequently swallowing nourishment, which act tears open the wounded parts, and causes inflammations in them, and produces such a secretion of mucus as excites almost constant cough, increasing the disturbance of the wounded parts.

"The introduction of a small elastic catheter may be easily accomplished in the first instance, though not without difficulty, after the sensibility of the parts have been increased by inflammation; and from the benefit I have seen derived from it, I should not hesitate to do it in all cases of extensive wounds of the throat, where the larynx or trachea is divided, even though the pharynx and œsophagus may be uninjured. It seems to me also that a similar plan of conduct is very suitable to strictures of the œsophagus."

Two cases of aneurism of the femoral artery are next related, in both which the operation proved fatal, or rather the patient died after the operation. However, as the case is circumstantially related, we shall leave the reader to form his own conclusions. In the second case, the death of the patient (a lady) is imputed to a peculiar irritability of constitution, which produced so general a disturbance that the part sloughed, in consequence of which hæmorrhage ensued, which in the end proved fatal. Mr. Abernethy introduces these cases by assuring us, that since his last publication he

has in other instances found the operation for the aneurism there recommended uniformly successful.

Some observations follow on the operation of puncturing the urinary bladder. Here the author recommends the puncture above the os pubis instead of by the rectum. We confess ourselves not prepared to maintain all the objections which must occur to every practitioner, against this operation; we therefore leave it to abler hands, whose objections, we doubt not, will appear before us.

A case of tic dolooureux follows, which gives rise to some useful reflections on the disease, and on the physiology of the brain and nerves. Lastly, we have some valuable practical remarks on the removal of loose substances from the knee-joint.

Thus have we gone through this miscellaneous performance; and from our account the reader will expect much information from the perusal of the whole. In this, he will not be disappointed. But while we thus recommend the book to our readers, we cannot refrain from a few words of advice to the author.

The multifarious materials of such a work makes us less surprized, if all should not be as complete as we expect from a surgeon of our author's rank. In answer to this we may be told, that want of leisure has prevented that accuracy which men less engaged in practice may attain. But when men of less notoriety than Mr. Abernethy are inaccurate, the consequence to the public is much less in proportion as their authority is less. We would not by this be thought to discourage such a writer from giving his thoughts, however crude, to the public. His strength of genius, his large opportunities, and his habits of enquiry, make us anxious to see his name as often as possible. But where a work cannot be rendered complete, it would be much more desirable to meet with it in its detached state in some miscellany, which, from the manner in which it is published, admits of a ready revision from the author himself, or from the suggestions of others. If the present volume should come to a second edition, it will require some time, according to the limited circulation of medical performances. In the mean while, the author is exposed to all the obloquy of his adversaries, without the means of answering them.

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*A brief Essay on the peculiar Advantages of the Flexible Metallic Bougies in the Treatment of Strictures in the Urethra, and the Evacuation of the Urinary Bladder. By W. SMYTH, the Inventor.* 8vo. pp. 70. London, 1804.

MR. SMYTH gives the following account of his discovery and its progress. "Very near thirty years of extensive practice in London as an apothecary, &c. have afforded me many opportunities of witnessing the dreadful sufferings of patients labouring under obstructions of the urethra; and it was my own misfortune some time ago to be afflicted with a severe stricture, attended frequently with retention of urine, for which I could find no relief in the means recommended by my medical friends.

"It

"It is said, that 'necessity is the mother of invention;' and to this circumstance alone, perhaps, we are indebted for the discovery of my flexible metallic bougies, by the use of which I soon obtained relief, and in the course of a few weeks I was rescued from a life of misery, and restored to health and comfort.

"The gentlemen who attended me during the early part of my illness, and had left me in a very deplorable situation, on seeing me again, were much surprized at my speedy recovery, and expressed great satisfaction on viewing the instruments by which it was brought about; and judging them to be of importance in this branch of surgery, wished me to continue my endeavours to bring them to perfection.

"By unwearied perseverance this desirable object was accomplished; and as they now appeared to every examiner to be far superior to the bougies usually employed in the treatment of strictures in the urethra, some of my friends advised me to confine their use entirely to my own practice, at least until I had reimbursed myself for the expence I had been at in their construction; but I considered, that if my bougies had any real merit (which seemed to be admitted on all hands) such monopoly would not only be disagreeable to surgical practitioners in general, but might eventually be a loss to the public; I therefore sent specimens of them to the Royal College of Physicians, the Royal College of Surgeons, all the Medical Societies in London, and some surgeons of my acquaintance, for their inspection; in consequence of which I was favoured with the repeated visits of the most curious and scientific of the profession, for the purpose of investigating more minutely the advantages of a discovery, which they considered of the utmost importance to mankind.

"Honoured as I am by their patronage, no exertions on my part shall be wanting to render this pliable metal useful (as it has frequently been found) in other parts of surgery; and to have been the inventor of any thing for the improvement of the healing art, and the relief of suffering humanity, forms no small share of my present gratification."

Mr. S. after some observations on the nature and causes of stricture, proceeds to the history of bougies and the various materials of which they have been composed. He then mentions their defects and the usual objections to the incautious use of caustic, where he supports his opinions by reference and quotations from the works of most respectable surgeons. Our readers will naturally conclude, that the author's next subject will be the advantages and superiority of his own bougies, with directions for using them, and an account of the cases in which they are most successful.

In the chapter on the retention of urine, Mr. S. gives an account of the various kinds of catheters which have occasionally been used, and points out their most obvious defects. After some observations on the advantages of his own, he concludes his pamphlet with a number of testimonials from surgeons of the first respectability.

Of London Hospital Surgeons we observe the following names, which we give in the order they appear in his work, viz. Birch, Carlisle, Pearson, Howard, Blizard, Blicke, and Cline.

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*A Complete System of Veterinary Medicine, in Two Volumes; by JAMES WHITE, Veterinary Surgeon; Vol. 2. The Materia Medica and Pharmacopœia. 12mo. pp. 266. London, 1804.*

THE Title of this second volume sufficiently explains its contents, and the reputation of the author will not fail to recommend it to the attention of the public. The utility of such works, when properly executed, is sufficiently obvious, but we think our readers will not consider the following short account, given by the author himself, as superfluous.

“ Within these few years only, has the Veterinary Art acquired a distinct appellation, and a solid foundation in this country. Receipts, handed down by traditionary skill, in which ingredients were accumulated without judgment or discrimination, constituted the principles and practice of what was termed farriery; a name which it derived from the occupation of the persons who practised it, who were, in general, smiths, or workers in iron (*Ferrarius.*)

“ To attempt to distinguish the causes of the horse's diseases, was far beyond their little skill; and, in general, random trials of the few burning medicines in their list, formed their boasted practice.

“ The science at one time began to rise above the order of smiths, and attracted the notice of medical practitioners; but it was not hereby greatly improved; they were not aware of the difference that has since been found to exist between the structure and economy of the horse and that of the human subject; nor had they any idea that this dissimilarity required much consideration with respect to disease, and the effect of medicine.\* Hence they were led to bring the therapeutics and pathology of the human body to *veterinary science*; and prescribed in somewhat larger doses to the brute animal, what they had found useful to man.† Their practice was of course unsuccessful, and the art sunk into its original disrepute. It is only since the institution of the Veterinary College, that the anatomy and physiology of the horse have been properly investigated, and the effects of medicines on his body correctly

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\* One thing which never should have escaped their notice, was the horizontal position of the horse as contrasted with the upright form of man.

† ARSENIC affords a striking example of this fact. In the human system, it is a deadly poison, but it may be given to the horse, even to the extent of two drachms, without danger.

WHITE VITRIOL, a strong emetic in the human body, in a small dose; may be given in the dose of eight ounces, without any violent effect. This, indeed, is the case with many other medicines, which, in man, are considered poisonous.

correctly ascertained, by numerous and appropriate experiments, both in health and disease, so that a secure foundation is now laid; and, as long as scientific men continue to study and practice the veterinary art, it must necessarily be in a progressive state of improvement.

"Notwithstanding many books have already been published concerning the diseases of the horse, the therapeutical part, or what relates to the medicines proper for his diseases, has not been hitherto explained. Such a work appeared to the author a *desideratum* in the veterinary art, and has induced him to add the present volume to his Compendium of the Diseases, &c. of which the indulgent public has already demanded a sixth edition. Having thus ventured on untrodden ground, he had no guide to lessen the labour of the attempt; but, by numerous and attentive trials, from the author's experience, and particular attention to this subject, he trusts he has been able to furnish a volume not wholly unacceptable even to the experienced practitioner. It has been the author's aim to explain the general properties of the various substances employed in medicine, accurately describing their particular effects on the body of the Horse, both in health and disease; the doses in which they may be given, their composition, and, in short, every thing that has any relation to them. This will be comprehended in the *Materia Medica*, or first part of the book; in the *Pharmacopœia* are comprized, directions for forming the various compositions in the most convenient and efficacious manner, with many valuable receipts of established efficacy under each head; the whole forming a complete system of therapeutics, instructing the inexperienced how to distinguish the purest and most genuine drugs, and to compound them in such a way, as will enable him to combat with success the various diseases to which horses are liable.

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*An Appendix to Practical Observations on the Nature and Treatment of the exasperated Symptoms of the Venereal Disease; containing Thoughts on the Nature and Management of the Venereal Bubo, particularly in its obstinate State. By EDWARD GEOGHEGAN, Surgeon to the Dublin General Dispensary. Octavo, pp. 44. Dublin, 1803.*

In a former Number we noticed the Treatise to which the present is an Appendix, as containing several interesting remarks on the treatment of this most important, and often most perplexing disease.

Some observations on bubo form the contents of this Appendix; and the general tendency of the author's precepts is to lessen the confidence so generally and often indiscriminately reposed on mercury as a panacea in every form of this complaint. He observes,

"As I propose to confine my observations principally to difficult cases, I shall pass over the ordinary occurrences, and suppose that matter has been formed, and its evacuation effected by a spontaneous rupture or by art; the sore, instead of discharging what is

termed well conditioned matter, and having an healthy aspect, discharges an ichor, the general appearance becomes ill-conditioned, the edges ragged, and irritable, attended with great pain, and often a sloughing, and sometimes running rapidly into gangrene; this state is generally accompanied with great anxiety, restlessness, quick pulse, hot, dry skin, &c. In other instances, callous, tucked-in edges are formed, occasionally having corresponding sinusses; sometimes continuing a long time stationary, at other times spreading slowly and to great extent; exhibiting the character of herpes exedens;—under the last mentioned appearances, I have observed, that the constitution did not seem to have suffered so much as in the former; however, in all, the worst consequences are to be expected when injudiciously treated.”

After quoting Hunter's practice with approbation, Mr. G. comes to the following conclusion:—

“The sum of all this is, that experience has proved, that an abscess produced by the venereal poison, after its contents had been evacuated, was exasperated by the antidote to that poison, in many instances, and ultimately got well without its use; and that the same symptoms had been very generally treated by a course of mercury, and under a system of regulations, which, as to the cure of the constitutional disease, is known to be inefficacious, yet the venereal poison was removed. An instance is also given, in which a grain of mercury had not been used, and the same success attended. These circumstances, although passed over unheeded, strike me as furnishing matter, from which some useful inferences may be drawn. ‘Facts and experiments, says Lord Kaims, are useless lumber, if we are not to reason about them, nor draw any consequences from them.’

“The course of reasoning, which occurs to me as arising from these observations, is, that the ulcerated buboes were not truly syphilitic, at the time they were aggravated by the antidote, and that many of these cases, which were treated in the trifling manner mentioned some years ago, were not affected at all by the mercury, but that they got well spontaneously; and the manner in which I conceive these events took place, was, that the virus was arrested in its progress by the disease it produced in the inguinal glands, and that when the contents of the bubo were evacuated in the first instance, the virus was cut off in limine, and a common abscess only remained, in which the mercury manifested deleterious instead of sanative effects; the same event I have known often to have taken place in phagædenic chancre, accompanied with phymosis; no mercury had been used, as particularly noticed in the first publication; the ulcers healed and remained well, the patients obstinately refused using mercury, which had been recommended as a security lest absorption had taken place.”

The mischievous effect produced by mercury on a very irritable habit suffering under a highly painful, inflamed, irritable sore is so well understood, and so generally admitted, that this part of the  
author's

author's reasoning, if unquestioned, is at least superfluous for any purpose of instruction. But the opinion to which he inclines, of the non-syphilitic nature of bubo in general, will bear some questioning. He observes,

"It is inculcated by every authority, and I believe it is the general practice, to commence the use of mercury immediately after the abscess has been evacuated; and notwithstanding an aggravated state of the sore should succeed, many surgeons think it advisable to persevere, until such a quantity has been used, as was usually found sufficient for the cure of the constitutional disease; bark, and the invigorating plan are generally conjoined. In healthy subjects, the aggravated state seldom occurs, the balance is mostly preserved, and the treatment seems to succeed; but when a morbid disposition previously exists, and the scale is liable to be turned on the application of any exciting cause, the injurious effects of mercury become obvious, and these instances are the tests, which develop the true character of the disease, and the just appropriation of the remedy. Mr. Hunter and others suppose a mixed state, which I think a probable circumstance; but the term is too indeterminate to afford us any satisfactory clew, it characterizes nothing, and generally encourages the exhibition of mercury. When I experience, and learn from the experience of others, that sea-bathing, country air, and the total exclusion of mercury (although little had been previously used) prove the most successful practice, and know, that a full and long continued use of it, is required to cure obstinate lues, I infer that they are not mixed cases, including the venereal poison."

We cannot but apprehend some danger from carrying this principle to its utmost extent. Though bubo may not *require* the use of mercury, the question is, whether it will *allow of* its exhibition, for the disease cannot (generally speaking) be cured without this remedy, and surely the sooner it is eradicated the better.

The author himself puts this in very strong terms, a few pages afterwards.

"With respect to the resolution of bubos by sending a current of mercury through them, every day's experience evinces, that the quantity which will suffice to remove the bubo, will not subdue the virus, but that constitutional symptoms will invariably ensue, after the idiopathic bubo has been resolved, if a sufficiency of mercury, under the necessary regulations, had not been used to have cured the constitutional disease; hence the removal of the symptoms affords no proof of the removal of the disease; and it is manifest that the virus is not destroyed in the glands. An ounce or two of ointment shall subdue the venereal irritation in the groin, and remove the bubo, and after four ounces have been used, will you not constantly find the virus in the throat or elsewhere? What's the conclusion? Surely, that it was only dislodged."

Surely then the first and principal object with the practitioner, is entirely and immediately to subdue the virus, by the only  
medicin

medicine which can be depended on for this purpose, and not to allow slight local inconveniences to interfere with this plan, trusting to the powers of nature, to tonics, and especially to a discontinuance of the remedy, to restore the original health, when all danger from the morbid virus is done away. In no distemper is an incomplete cure more to be dreaded, since a relapse is here, not a return of the original symptoms, but a progression from bad to worse, from severe to dangerous, from troublesome to unmanageable, from the sufferings of a few weeks to the protracted misery of years, of (it may be) the remainder of life.

After all, the precise point to which mercury may and ought to be pushed, cannot be determined by any set of rules; but the propriety of the practice must arise from the circumstances of each individual case; nor will the very candid author of this little treatise venture absolutely to forbid it in all cases of suppurated bubo, but only in such as are attended with severe local inflammation. In this he would be joined by most practitioners, but not so (we apprehend) in the opinion to which he inclines, of the propriety of abstaining to give this remedy in suppurated bubo, unless other symptoms were present, characteristic of confirmed lues; since a *confirmed lues* is precisely that which the surgeon dreads, and to avoid which, all his endeavours will be most strenuously directed.

### *To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

THE article in your last Journal, in which my answer to Mr. Goldson is reviewed, requires several observations, which would be too long for you to insert; but I beg the favour of you to insert the following:

A temporary insusceptibility of the small-pox is so common, that I am still inclined to think it rash, and even ridiculous, to conclude, that because a person, at *one period* of life, resists the infection, he will *always* resist it.

I never stated, that I had inoculated eleven hundred of my cow-pock patients with variolous matter; and the Reviewer is also incorrect in asserting, that I had only adduced two instances of danger from the practice. The case of Mr. Miles, and that of Mr. Grant's child, are instances of the contrary; and Dr. Buchan says, he has known several facts of the kind, but does not mention the particulars.

Other instances of the same sort have occurred, some of them



them very lately ; which I shall shortly lay before the public, in a second edition of my Pamphlet.

I have never discouraged experiments for ascertaining the efficacy of vaccination ; but the experiments I prefer are different from those which the Reviewer recommends. I consider variolous inoculation after the cow-pock as no longer necessary ; but recommend an experiment, which is more safe, and no less convincing, that of exposure to the natural infection of the small-pox. I am, &c.

*New Street, Hanover-Square,  
August 15, 1804.*

JOHN RING.

## MEDICAL AND PHYSICAL INTELLIGENCE. [ FOREIGN AND DOMESTIC. ]

MR. SCHAUB, of Cassel, has made some observations on the use of charcoal, in which the experiments of Mr. Lowitz with this substance are for the most part confirmed. Mr. S. employed charcoal with advantage for clarifying different liquors, and it also served to whiten tartarous acid and different solutions of salts. Meat, which had acquired the highest degree of putrefaction, on being rubbed with charcoal powder, lost entirely the putrid stench, and only disengaged the smell of ammonia. Mr. Schaub has preserved venison for above six weeks in an unaltered state, by covering it with charcoal powder. On adding to honey, dissolved in water, a certain quantity of charcoal powder, it will lose its colour and smell ; brandy is likewise deprived of its particular smell by shaking it with charcoal powder, and afterwards distilling it. The residuum of sulphuric ether, on being mixed with charcoal, becomes clear and transparent like water. The odours of several substances, as valerian, galbanum, balsamus Peruvianus, musk, &c. have been diminished, or have entirely ceased by the addition of charcoal powder. Crude tartar, on being boiled with charcoal, yields pure and white crystals.

DR. HUNOLD, in his observations on the use of charcoal in different diseases, has found it of great effect in herpetic exanthemata, particularly those which arise from the frequent eating of salt meat. For this purpose he mixed charcoal powder with as much rum as rendered it the consistency of a soft plaster, which he applied to the diseased spots, whereby the eruptions gradually dried, and then disappeared. Charcoal powder mixed with an equal

equal quantity of pulvis cortic. Peruviani, is successfully employed for scorbutic gums, the bleeding of which will certainly cease, and the disagreeable smell of the breath be greatly diminished, by gently rubbing the gums with this powder. He likewise administered the charcoal powder with much success in putrid fevers, in a dose of half a drachm, to be taken six times a day. In foul ulcers of the legs it proved likewise very serviceable, and he found it also to be a useful antiseptic applied on gangrenous parts.

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#### ST. THOMAS'S and GUY'S HOSPITALS.

The Lectures for the ensuing season, at these adjoining Hospitals, will commence on the 1st of October.

ST. THOMAS'S HOSPITAL.—Anatomy, human and comparative, by Mr. Cline and Mr. Cooper; Principles and Practice of Surgery, by Mr. Cooper.

GUY'S HOSPITAL.—Practice of Medicine, by Dr. Babington and Dr. Curry.

Chemistry and Experimental Philosophy, by Dr. Babington and Mr. Allen.

Theory of Medicine and Materia Medica, by Dr. Curry.

Midwifery and the Diseases of Women and Children, by Dr. Haughton.

Physiology, or Laws of the Animal Economy, by Dr. Haughton.

Occasional Clinical Lectures on select Medical Cases, by Drs. Babington, Curry, and Marcet.

Some time in the winter will be given a Course of Lectures on the Structure and Diseases of the Teeth, by Mr. Fox, surgeon-dentist; and on the Veterinary Art, by Mr. COLEMAN, Professor at the Veterinary College.

These several Lectures are so arranged, that no two of them interfere with each other in the hours of attendance; and the whole is calculated to form a complete course of medical and chirurgical instruction. Terms, and other particulars, to be learnt from Mr. Stocker, apothecary to Guy's Hospital, who is also empowered to enter gentlemen as pupils, to such of the lectures as are delivered at Guy's. Among the numerous improvements that are now carrying on at Guy's Hospital, intended to facilitate and to increase the acquisition of medical and chirurgical science to pupils, not only a new, enlarged, and commodious Lecturing Theatre has been built, so contrived as to admit of the several chemical processes being carried on before the class; but there is already in considerable forwardness an extensive Library and Museum, in which, along with the valuable collection of books belonging to the Physical Society, there will be deposited the various morbid preparations that are daily accumulating, with a correct account of the respective cases to which they belonged, so as to form a registry of practice, and a collection of facts, that must prove of the utmost importance to future inquirers.

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*Westminster*

*Westminster Hospital, August 29, 1804.*

The established plan of instruction for the Surgeons' pupils of this Hospital will be continued throughout the present season.

Mr. Lynn, Mr. Morel, and Mr. Carlisle, will exhibit and explain the several chirurgical operations; and Mr. Carlisle will deliver occasional lectures on the subjects deemed most useful for hospital students.

Mr. Carlisle will give an introductory lecture at the hospital, on Tuesday, October 2, at twelve o'clock precisely.

For other particulars, apply to Mr. Lynn, Surgeon, Parliament Street; or Mr. Carlisle, Surgeon, Soho Square.

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*Medical Theatre, St. Bartholomew's Hospital.*

The following Courses of Lectures will be delivered at this Theatre during the ensuing winter.

On the Theory and Practice of Medicine, by Dr. Roberts and Dr. Powell.—Clinical Lectures on select cases occurring in the Hospital, will be occasionally given by Dr. Roberts.

On Anatomy and Physiology, by Mr. Abernethy.

On the Theory and Practice of Surgery, by Mr. Abernethy.

On Chemistry and the Materia Medica, by Dr. Powell.

On Midwifery and the Diseases of Women and Children, by Dr. Thynne.

The Anatomical Lectures will begin on Monday, October 1, at two o'clock, and the other Lectures in the course of the same week.

Further particulars may be known by applying to Mr. Nicholson, at the Apothecary's Shop, St. Bartholomew's Hospital.

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Mr. WILSON and Mr. THOMAS, will commence their Lectures on Anatomy, Physiology, Pathology, and Surgery, at the Theatre, of Anatomy, Great Windmill Street. One Course on October 1, terminating on January 18; and the other Course beginning on January 19, and terminating towards the middle of May. In the October Course they explain the structure of every part of the human body, so as to exhibit a complete view of its Anatomy, as far as it has been hitherto investigated; to which are added, its Physiology and Pathology. In the Spring Course, the structure of the human body is again explained; after which follow, Lectures on the Operations of Surgery, and the Course concludes with the Anatomy of the Gravid Uterus. A Lecture is given daily, from two until four o'clock.

A room is likewise open for Dissections, from nine o'clock in the morning till two in the afternoon, from October 10, till April 20; where regular and full demonstrations of the parts dissected are given; where the different cases in Surgery are explained; the methods of operating shewn on the dead body; and where also the various arts of Injecting and making Preparations are taught.

*Theatre*

*Theatre of Anatomy, Blenheim Street, Great Marlborough Street.*

Mr. BROOKES will commence his Autumnal Course of Lectures on Anatomy, Physiology, and Surgery, on Monday, October 1, at two o'clock. A suite of commodious apartments, thoroughly ventilated, and replete with every convenience for the purposes of dissecting and injecting, will be open every morning till two o'clock, where Mr. Brookes attends.

Dr. HOOPER will commence a Course of Lectures on the Practice of Physic, Materia Medica, and Pharmaceutical Chemistry, on Wednesday, October 3, at Mr. Brookes's Theatre. These Lectures will be delivered every morning, (Sundays excepted) at a quarter before eight o'clock.

Dr. BATTY will commence his Autumnal Course of Lectures on the Theory and Practice of Midwifery, and on the Diseases of Women and Children, on Monday, October 8, at half past ten o'clock. These Lectures will be given at Mr. Brookes's Theatre.

Prospectuses and particulars of the different Courses of Lectures delivered at this Medical School, may be had of Mr. Brookes, Blenheim Street; Dr. Hooper, St. Mary-le-bone Infirmary; or of Dr. Batty, Great Marlborough Street.

#### UNIVERSITY OF GLASGOW.

The Medical Lectures in the University of Glasgow will begin on Tuesday, the 6th of November, at the following hours.

Dietetics, Materia Medica, and Pharmacy, by Dr. Millar, at ten o'clock in the forenoon.

Midwifery, by Mr. Towers, at eleven.

Theory and Practice of Physic, by Dr. Freer, at twelve.

Anatomy and Surgery, by Dr. Jeffrey, at two o'clock in the afternoon.

Chemistry and Chemical Pharmacy, by Dr. Cleghorn, at seven.

Clinical Lectures on the cases of patients in the Royal Infirmary, by Dr. Freer and Dr. Cleghorn. The first Lecture by Dr. Freer, on Tuesday evening, the 13th of November, at six o'clock.

Dr. Brown will commence his Lectures on Botany, about the beginning of May next.

*Regulations enacted by the Senate of the University of Glasgow, respecting Degrees in Medicine.*

1. That before any person can be allowed to be a Candidate for a Degree in Medicine in this University, he shall appear personally before the Senate, and lay before them evidence, that during the space of three years, or sessions of six months each, he has regularly attended in some University or Universities, or in some Medical School or Schools of reputation, the following Medical Classes, viz. Anatomy and Surgery, Chemistry and Pharmacy, the Theory and Practice of Physic, Materia Medica, and Botany.

2. That

2. That he shall bring forward evidence, that, during one year at least, he has attended Medical Classes in this University.

3. That the Candidate shall undergo three separate examinations in private by the Medical Professors of the University; and write a Commentary on an Aphorism of Hippocrates, and another on a case of disease propounded to him by the said Examiners. The first examination shall be on Anatomy and Physiology; the second, on the Theory and Practice of Physic; and the third on Chemistry, Materia Medica, Pharmacy, and Botany.

4. That the Examiners shall report to the Senate their opinion respecting the medical knowledge of the Candidate; and if their report be favourable, his name as a Candidate for a Degree shall be entered in the minutes of Senate, and a day fixed when the Candidate shall read his Commentaries on the Aphorism and Case, and answer such questions on the several branches of medical science, as shall be put to him by the examiners, in presence of the Senate. If the Senate be of opinion that the Candidate has shewn himself worthy of a degree, it shall be conferred in presence of the Senate, by the Vice Chancellor, provided the Candidate has not published a Thesis, which he may or may not do, according to his own option: but if he has published a Thesis, he must defend it, and the degree must be conferred in the Comitia.

5. That the whole of the examinations shall be carried on, and the Commentaries upon the Aphorism and Case must be written in the Latin language.

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Dr. BRADLEY will commence his Course of Lectures on the Theory and Practice of Medicine, in the first week of October, at his house, No. 25, Parliament Street.

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Dr. GEORGE PEARSON, M. D. F. R. S. senior physician to St. George's Hospital, will commence his Lectures on Physic and Chemistry in the first week of October, as usual.

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Dr. BADHAM's Lectures on the Practice of Physic, Chemistry, and Materia Medica, will commence on Wednesday, October 10, at eight o'clock in the morning, at Dr. Crichton's late Laboratory and Lecture Room, Clifford Street, Burlington Gardens, where printed particulars may be had.

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Dr. DENNISON and Dr. SQUIRE will, on Thursday, the 4th of October, begin a Course of Lectures on the Principles and Practice of Midwifery, and the Diseases of Women and Children.

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Dr. CLARKE's Lectures on Midwifery and the Diseases of Women and Children.—The winter courses will begin at Dr. Clarke's House, New Burlington Street, on Thursday, October 4, at a quarter past ten o'clock. Particulars may be known and plans of the Lectures had, by applying to Dr. Clarke, as above.

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Mr.

Mr. SYER will commence his Lectures on the Elements and Practice of Midwifery, &c. on Monday, October 1, at six o'clock in the evening; and in future, on Tuesdays, Thursdays; and Saturdays, at the same hour, for the convenience of those gentlemen who attend surgical lectures. The Course will be given at No. 5, Bishopsgate Street, Within.

Mr. TAUNTON will commence his Autumnal Course of Lectures on Anatomy, Physiology, and Surgery, at the Finsbury Dispensary, St. John's Square, on Saturday, the 6th of October, 1804. — Practical Anatomy, as usual.

Mr. CARPUE will commence his Anatomical Lectures, at his Theatre, Broad Street, Golden Square, on Monday, Oct. 1, 1804.

Mr. CHEVALIER, Surgeon to the Westminster General Dispensary, will commence his Autumnal Course of Lectures on the Principles and Operations of Surgery, on Wednesday, October 3, at seven o'clock in the evening, at his house in South Audley Street, Grosvenor Square, where printed particulars may be had.

Mr. GILHAM, in a letter to Dr. Bradley, dated Aug. 16, 1804, says, "From my personal knowledge of you, I take the opportunity of noticing the anonymous and improper call on me, in No. 66, of the Medical and Physical Journal, respecting the Death Wound of Sir Ralph Abercrombie; and have only to observe, that if I had considered it of sufficient interest to the public, I should have laid it before them long since."

A Correspondent in Bedfordshire has requested us to insert the following Note. "A Subscriber wishes to be informed, through the medium of the Medical Journal, when the posthumous Work of Dr. Garnett will be published?"

Mr. ALDER will publish in a few months, in one large volume octavo, Extracts and Observations intended to shew the Nature of the Causes of Epidemic and other Fevers; and also the Meaning which ought to be affixed to the term Putrid Contagion, if we do not entirely abolish it.

Mr. ALDER will also publish, in a few months, in one large volume octavo, a Treatise on Fever, shewing the Genera, Species, and Varieties of it, with the proper Mode of Treatment of each. The above works are intended to begin a Series to complete the design sketched in Mr. A's outlines.

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#### TO CORRESPONDENTS.

Communications are received from Dr. Uwins, *Medicinæ Studiosus*, and Mr. Thackeray.

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#### CORRIGENDA.

Page 137, line 6, after the last word, *James*, add, *it is thought*.  
137, for *Dr. Rock*, read *Dr. Koch*.

THE  
Medical and Physical Journal.

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Printed for R. PHILLIPS, by W. Thurst, Red Lion Court, Fleet Street, London.

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

THE Case, which I have now the honor to request you will insert in your next Number, I have called GASTRODYNIA; but I shall not dispute the propriety of the term. From the peculiar circumstances under which it was compiled, it claims the attention of the medical world; and I earnestly beg your Correspondents to offer their animadversions upon it, as they regard that liberality of sentiment, and urbanity of manners, which ought to direct the conduct of physicians in their intercourse with one another. What further reflections I may have to offer on this extraordinary incident in my professional exercise, for obvious reasons, must be reserved for a future opportunity. In the mean time, your Readers will give me credit for a small share of passiveness of temper, that I did not provoke a quarrel under the roof of a patient. I have somewhere read, that "a soft answer turneth away wrath, but grievous words stir up anger."

I am, &c.

Newcastle, Aug. 1, 1804.

T. TROTTER.

ON Thursday, Jan. 12, about three in the morning, I was called by the watchman to visit Mrs. ———, in the neighbourhood; a servant girl immediately followed, and called out that her mistress was dying. I found the lady sitting up in bed, and writhing with pain. This happened to be the fifteenth day from her lying-in, of her third child. The pain was felt in the *epigastric region*, towards the *right hypochondrium*, under the last rib, and darting from thence, acutely, upwards to the shoulder of the same side. The pulse about 140, of moderate strength. She

( No. 68. )

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had

had a *diarrhœa* upon her. All circumstances attending the labor had been favorable.

These pains, it appeared, began the preceding evening, had increased gradually till three in the morning, when they became intolerable, and made her cry out with great vehemence. Being an entire stranger to the lady, I enquired of her husband, if, when in her usual health, she was subject to complaints of the stomach, such as, uneasy indigestion, flatulence, constipation of bowels, &c. He answered in the affirmative. I further asked, if gout was known in her family. He said, her father was subject to gout.\* And, lastly, I enquired if her medical attendants, at any time, had hinted their suspicion of *gall stones*; or if *jaundice* had ever been noticed. He did not remember any thing being hinted on these subjects.

I gave her immediately Tinct. opii, gt. 30, Mag. ust. ʒß. Sp. menth. pip, ʒij. aa. fontanæ ʒj. ft. haust. In fifteen minutes another draught, with half the quantity of these ingredients, was given. The pain became more endurable, and she ceased to cry out. In half an hour she was considerably relieved; and the pain of the side was only felt on a deep inspiration.

About an hour after my arrival, Dr. Clark and Mr. J. came in; both of whom had seen the lady the night before. I informed these gentlemen of what I had done; and freely imparted to them my opinion of the case. I had just told the husband of the lady, that I conceived the pain to be of the spasmodic kind; depending on debility and an irritable nervous constitution, accompanying the puerperal state. Dr. C. spoke of febrile rigors, cough, and pleuritic stitches, and the danger of puerperal fever; but he gave no decided opinion. It is true, the patient said she had frequent shiverings; was often disagreeably hot, and sometimes in profuse perspirations. But, with such a pulse, how was it possible to suspect a *pleurisy*? These symptoms and feelings only indicated debility, and an accumulated nervous sensibility as peculiar to a lying-in woman; and to be referred to those changes, evolutions, and sympathies in the uterine and mammary organs, after the birth of the infant. A draught with forty drops of tinct. opii was prescribed, lest the pain should return; a blister was

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\* Two or three days after this, Mr. — informed me, that his wife's mother was then ill of a complaint which her London physicians called Gout.



was laid on the part affected: A *purging enema* to be followed by an anodyne one, and a *purging mixture*, were also ordered.

About noon the pain returned, and I was sent for. I gave the opiate draught immediately; and ordered a stimulating *enema* of *asafetida*, &c. to be administered. The pain became easier and died gradually away.

We met in the evening; the patient had three motions in the course of the day, and rather copious. Dr. C. spoke of the propriety of *brisk purgatives*. I saw nothing in the case of the patient that could indicate *brisk purgatives*. The bowels for some days had been very lax, and the lady was much debilitated. Dr. C. would not admit that she was reduced in strength; and said, if you chuse to enquire you will learn that this woman has been indulging in very strong diet. He concluded a long harangue on that subject, by saying, "Your lying-in women constantly eat too much; these London ladies are all full-livers; is your wife a Londoner?"—My wife not being a Londoner, did not come within the pale of his sarcasm. On making enquiry about our patient's food, I was told by the young lady who attended her friend, that it consisted almost of slops, such as tea, coffee, calf's-foot jelly, veal broth, &c.; these in small quantity, and on no day had she been able to eat above half the wing of a fowl. To these articles are to be added three small tumblers of porter; her appetite was certainly much impaired.\* All this day the urine was natural.

13th. Friday. About seven in the morning I saw our patient; Mrs. — had passed a most restless night; her stomach had rejected every thing; and what came up was so sour, that it felt like taking the skin off her throat. Pulse 150, rather low: she complained of great sinking, and said she could not live long in her present condition. I called for a little brandy in a cup; and having inflamed it, I allowed the one half to be consumed. While I was preparing this simple prescription, she discovered great dejection of spirits, and appeared much exhausted. I assured her of immediate relief. She swallowed one mouthful of biscuit soaked in the warm brandy, and with it

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about

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\* The experienced accoucheur who attended the labour, recommended a nutritive diet, without which he considered so delicate a frame to be unequal to the office of suckling a child.

about four or five tea spoons full of the liquor. These she retained; the vomiting did not return; and in half an hour she took some coffee and toast.

Between nine and ten o'clock the pains of the side and shoulder returned, but not so acutely painful as yesterday. Dr. C. now expressed his opinion that the pain was PLEURISY, and that bleeding was the fittest remedy. Such a declaration astonished me: A pleurisy requiring venæsection, with a pulse beyond 150! I think I heard Dr. Clark say the pulse was 160 by his watch. Blood to about sixteen ounces was taken away: as the first cupful flowed, she said she felt easier, but made no farther expression to that purpose during the bleeding. The pains, as before, declined gradually in the course of the day. I am rather inclined to believe, if Dr. C. had seen this lady at seven in the morning, under the exhaustion, languor, and dejection of spirits, from the sleepless night and constant retching to vomit, that he would have thought bleeding as *little short* of destroying life.

14th and 15th. Saturday and Sunday passed under much uneasiness of bowels, rather than pain, with frequent stools. A draught with colombo and mag. ust. which had been used since Thursday, with an opiate at bed-time, were the chief medicines. Pulse 120; nights restless. The urine, for the last two days, was turbid, as usual where large doses of opium were taken.

I was this day asked by the husband, whether I entertained the same opinion I had at first of his wife's illness. I replied, that I had seen no reason for changing my original sentiments; they were now more confirmed.

16th, Monday. I was called up about four in the morning. I found Dr. Clark and Mr. I. in the house. The pains at the right side and shoulder had returned. Pulse 140. Dr. C. again proposed bleeding; he said it had removed the pain before, and was still the fittest remedy. If I was surprized at the former mention of blood-letting, I was now confounded. There did not appear to me a single symptom to justify it. I asked his explanation. He could give none. I begged he would cite any authority for bleeding in such a case. He answered evasively; but added, that his own practice convinced him he was right. He narrated the case of a Mr. D——ll, where large bleedings had been used; but it had not the slightest analogy to our patient's situation. The common effort of respiration had never been impeded here; there were no dyspnœa, or oppression about the breast; the expectoration was free;

nor

nor had I ever heard the patient cough during any of my visits. I said, if the disease were pleurisy, as you think, would it not have been aggravated by the large doses of opium taken on the former days? Would you administer opium on the accession, and during the inflammatory stage of pleurisy? He answered, that he had always been in the practice of giving opium from the very first attack, and always observed the *best effects* from it! I reminded him of the lady's naturally weak frame, which I had now learned was of the most delicate cast. I mentioned the debilitating effects of her confinement; the loss of blood which unavoidably attends the most fortunate delivery, as well as what she lost by the former bleeding: I spoke of the very lax state of her bowels for some days past; the acute pain she had suffered; her sleepless nights, and profuse perspirations. Against all these he remained immovable; and repeated the confidence he gained from his own practice. I went on: Do you then mean to contend, that there is no appeal to first principles in our art? Are the authority of the learned in our profession, the wisdom and experience of ages, to be overthrown by an opinion of either yours or mine, that rests on no foundation? Can you support your method of cure by any practical writer on pleurisy, such as Sydenham, Huxham, or Cleghorn? He offered to appeal to none of these. I quoted the celebrated Aphorism of Hippocrates, in defence of my arguments, "*Qui acidum cructant, non pleuritici sunt.*" If there is a *truism* in medicine, I said, that had obtained the consent of physicians in every age, it is this aphorism; and is exactly in point with our patient's case. He evinced no approbation for the judgement of the Coan Sage; nor did he seem disposed to quit the ground he had taken at the beginning of the conversation. I further asked him, if he thought it were possible for an inflammatory affection of the pleura, requiring blood-letting, to exist in the body with a pulse at 146? He replied, "I allow that the inflammation could not be very active with such a pulse." Then do you call bleeding a passive remedy? "I still think bleeding the best remedy here." This conversation lasted upwards of an hour. The lady admitted that her present pains were by no means so severe as when I first saw her.

About twelve ounces of blood were taken from the arm. The lady was repeatedly asked while the blood flowed, whether the pain of the side felt easier; but she persisted to the last that she felt no relief. Although she lay in

the horizontal posture, towards the conclusion she became very faint; but syncope was prevented by volatile salts and a little Madeira wine. The last words the patient uttered as we left the room, were, "*indeed, I feel no easier.*" We retreated indeed without the honor of a triumph. The former blood had been thrown away by mistake; but whether the other gentlemen inspected the last I cannot tell; I heard nothing more about *cupped surface or inflammatory crust*.

Several loose motions took place this day. In the evening I proposed giving wine, and diminishing the opium; it was not agreed to at this visit. The night draught was repeated, and she was ordered the following purgative mixture.

R. Natron. tart.  $\bar{3}j$ . Infus. tamarind.  $\bar{3}iv$ . Mannæ  $\bar{3}iv$ . M. Sign. A table spoonful of this mixture to be given every two hours till a motion is procured, beginning in the morning, if the bowels have not been opened in the night.

17th, Tuesday. Mrs. — passed a restless night. She had six motions in the course of this day, resembling coffee grounds, without any mixture of fecal matter. She complained of great uneasiness of bowels, with much noise and flatulent distension. This day three half glasses of Madeira were taken. Medicines as before.

18th, Wednesday. Very restless last night; bowels uneasy and painful from flatulence. The pains of the side and shoulder returned as before, about eight in the morning. Dr. C. was out of town. To ease the pains, I ordered thirty drops of tinct. opii to be added to the first day draught, and forty drops of æther; and fifteen drops of the tinct. with the same quantity of æther were put in all the other day draughts. A warm plaster was laid over the part affected.

There were languor and depression about our patient this morning which I did not like. I urged her to continue a half glass of Madeira frequently. The pain was soon mitigated, and died away in the course of the day, as it had done before. In the evening she was easy, and appeared disposed to sleep.

At my morning visit, I sent for the cook, and directed her how to prepare beef-tea for her mistress, as strong of the meat as possible. This was done not only for the purposes of nourishment, but as being of an animal nature, was best suited to check that fermentation in the stomach and bowels, that seemed to convert all her other food into  
flatus

flatus and acidity. She took sufficiently of it throughout the day.

19th, Thursday. Mrs. ——— had a good night for the first time, having slept in all six hours. She felt much refreshed. The pulse was now under 100; it was from 96 to 98. I recommended the diet of yesterday to be pursued, and encouraged her with the prospect of a speedy recovery. She had got quit of great quantities of flatus in the night, and felt relief in proportion. The infus. gentian comp. was ordered in lieu of the colombo.

About noon Dr. C. arrived, not having seen our patient for 40 hours. I informed him, that we had gained much ground in his absence. He asked the usual questions of the lady; and was particularly officious in adjusting the windows for ventilation. He expressed nothing immediately on the favorable change in our patient; but when conversing in the adjoining room, he said to me, "*I firmly believe all cases of this kind would soon recover, were they left to moderate diet, airy rooms, keeping the bowels open, and opiates at bed-time.*" I agreed entirely with him; inasmuch as this treatment excluded all weakening evacuations by *bleeding*, and severe courses of *purgings*.

We met in the evening; Dr. C. thought the lady so easy and well, that he would not disturb her with an enema this evening. It is to be observed there was no motion this day! The Doctor seemed in a better humour; he was returning to Durham, to visit a stalled prebend; he shook hands most cordially.

19th, Friday. Our patient had a quiet night. Pulse 104. She had an easy motion this morning; Nature appeared to be resuming her office. Dr. Clark and Mr. I. were both absent at the usual hour of consultation. I directed every thing similar to the preceding day. On Wednesday morning I thought the lady in considerable danger; but now, if the irritable state of the bowels were not to be revived by purgatives, her health and strength must quickly return. I believe the attendants of the lady at this time considered her convalescence certain.

Dr. C. came about noon. He was not satisfied that the patient had only one easy motion; he ordered a saline glyster to be thrown up immediately; three very loose stools followed quickly. I was not present.

We met in the evening. The lady was certainly worse, more irritable and uneasy. Pulse 114. The word *Pleurisy* had not been mentioned since the last bleeding. Dr. C. recurred to his opinion, that purgatives were still the best means

means of cure; to prevent *Puerperal Fever*, and cleanse the bowels of acrid matter. I said to him, Do you observe any thing that threatens puerperal fever? He gave no direct answer. I repeated, that I saw not the least necessity for purgatives; the uneasy state of bowels here is to be referred to original debility of the intestines; and the irritability of the nervous system is no doubt constitutional, but has been particularly increased by unnecessary bleeding, and too frequent purges. He said in words as nearly as I can recollect, "*I allow that I might have been mistaken, in calling the pain of the side Pleurisy; but long experience in many cases assures me, that purgatives with evening opiates will answer best.*" I agreed with him that the bowels ought to be kept open; but as purgatives must keep the bowels in a constant state of irritation, and drain the body of nourishment, so desirable to be retained under the present circumstances, I could see nothing to justify their exhibition. I proceeded: As you have given up your first opinion, that this lady's disease was *Pleurisy*, what name do you give to her complaint now? "*You mean to oppose my practice; I cannot go on this way; I will leave the patient to you altogether.*" His eyes glistened, and he seemed under considerable agitation when he spoke these words. I was not prepared to answer *unprovoked illiberality*; my attention at the time, was rivetted to the condition of the patient, for whom, in a course of purgatives, I beheld nothing but a train of tortures. Dr. C. went on by saying, that "*Four grains of calomel, to be followed in the morning by a dose of jalap, was the fittest medicine that could be prescribed.*" Such an expression deserved no reply from me, but it made me shudder. I said, that I must maintain my opinion, unless he could produce more satisfactory reasons: if it was to keep the bowels regular, I would agree with him; but purging in so delicate a subject, after a week of suffering, could not be justified. He complained that I differed from him. I answered, that it was as natural for him and I to disagree in opinion, as other physicians had often done before us. Have you not often differed in opinion with Mr. I.? He replied, that they had never materially differed. I mentioned the case of Miss B——, which he had published; and their disputes about the Infirmary; where they had divided the town and neighbourhood on the subject of Fever Wards. The purging medicine that was to begin this *practice*, was as follows:

R. Sal,

R. Sal. Ruppell, ʒvj. Lact. amygdal. ʒiv. Sacch. alb. ʒj. M.

Sign. The emulsion. Two table spoons full every hour, till a plentiful easy motion is procured. It is to be recollected, that on this day the patient had a natural easy motion in the morning; three loose evacuations followed the enema; and as we were leaving the house, the nurse announced another. Mr. I. was called up in the night, two more stools having taken place, making in all, *seven* in the space of fourteen hours! I did not see the lady after this evening.

I had now formed the resolution of returning Dr. Clark the compliment, of "*leaving the patient to him altogether*," as he *politely* expressed himself to me. Immediately on coming home, I wrote a note to the lady's husband, requesting he would excuse me from meeting Dr. C. in the morning, and disavowed the treatment about to be adopted. This left Mr. — to act as he thought proper. It was no longer in my power to do any good; and to receive a *fee* on other terms would have been dishonourable.

This lady, with all the affection of a fond mother, had promised herself the happiness of suckling her child. When I first saw her she had abundance of milk; but on the last evening, the girl who was drawing the breast, complained that it was now so acrid she could scarcely bear it in her mouth. How could it be otherwise under such a draining mode of treatment?

Mrs. — had formerly suffered severely from piles, as a consequence of weak bowels. Had I been informed of the circumstance, it would have the more confirmed me against all strong purgatives. And indeed, report says, that these tumours did return, and with them swellings of the limbs, requiring the assistance of flannel rollers. I need scarcely add, that by all accounts, this lady's confinement afterwards, was long and painful.

OBSERVATIONS ON MR. GOLDSON'S PAMPHLET; *by*  
ALEXANDER HERMAN MACDONALD, M. D. *Surgeon in*  
*his Majesty's Service. Communicated by Mr. RING.*

"Vox diversa sonat; populorum est vox tamen una." MARTIAL.

THE appearance of Mr. Goldson's pamphlet at a period when vaccine inoculation seemed to have conquered every opposition, could not but attract the general notice of the public.

Among no class of men was the surprize so much excited, as among the medical profession. They had witnessed the repeated triumphs of vaccine inoculation, and the downfall of those arguments which were once suggested by the sophistry of a Marcus Herz, the ignorance and self-interest of a Vaume, and the ridicule of a Moseley; and therefore, they could be no strangers to the difficulty which would attend the fabrication of new objections. Their surprize, however, soon ceased, when they perceived that the arguments contained in the pamphlet under consideration, were the very same that were made use of by every opponent, in the earlier part of the practice; with this difference, that in the present instance they are supported by cases and supposed facts; whereas, formerly, they could only be looked upon as mere conjectures. The author's address in obviating the objections which were made against his predecessors, is too striking to pass unobserved. He knows there are cases upon record, which have resisted the variolous infection thirty, forty, and even fifty years subsequent to vaccination, and that these have baffled every opposition; he therefore very prudently pretends to believe, that the casual cow-pox possesses the preventive powers; and carries his faith so far as to advise the Vaccine Institution, "to petition Parliament to lend them once more their fostering hand, (I suppose to make an establishment for keeping cows and greasy horses) that the profession might be better enabled to procure matter immediately from the cow. "This," in his opinion, "would be soliciting them to exert a power truly consistent with their constitutional prerogative; and suited to the temperate wisdom of their deliberations as a legislative body." P. 70 and 71.

Whether it was an anxious wish to discover error, and a sincere love of truth, which induced our author to lay his work



work before the public, is a question not easily to be determined. If we were allowed to judge from the facts before us, we should be apt to conclude, that he had been actuated by passions far more powerful. For, to see the Discoverer of Vaccine Inoculation neglect him so far, as to take no notice of his letter,\* could not but excite some resentment in a man, who was accustomed to be looked up to by medical practitioners; and when the Rev. Mr. Griffin, a gentleman not belonging to the profession, from motives of the purest philanthropy, encroached upon a practice so glaringly neglected by the medical men in his neighbourhood, as to draw upon them the censure that they were "a century behind the whole world in improvement," p. 6, it is very natural to expect, that one of them should be provoked to stand up for the honour of the Faculty, to clear them from the imputation under which they laboured, or at least to give some reasons to the world, feeble as they are, in extenuation of their neglect. The author, however, is far from acknowledging these to have been his motives; and rather endeavours to conceal them, by making strong professions of candour and liberality. "It is far from his wish to spread vain alarms," (p. 62); yet he has taken great care that his advertisements should make a conspicuous figure in the public papers; and that his pamphlet might be better and more generally known, we are publicly informed,† that he has been very liberal in making a gratuitous distribution of it. Keeping Dr. Jenner's words in his remembrance, he has conducted his experiments, "with that calmness and moderation, which should ever accompany a philosophic research;" accordingly, he never has lost the opportunity of exposing his vaccinated children to the variolous contagion; and when this did not succeed, he made them sleep in the same cradle with others who had the small-pox; took the cap from the head of the one, and clapped it upon the head of the other; and the same filthy cap was made use of through the whole of the contagious period of the disease. (p. 31). In no less than three instances, he has carried his calmness and moderation so far as to persuade parents, who had already witnessed the beneficial effects of the vaccine inoculation in their own family, to submit their other children to the inoculation of the small-pox, for no other purpose but

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\* See p. 44. and 45.

† *Med. and Phys. Journal*, No. 65, 66.

but to give him an opportunity of infecting those that were vaccinated, if possible. P. 26, 30, and 66.

The calmness and moderation of his reasoning is equally conspicuous. In the very beginning of his introduction he tells us, that "the vaccine inoculation has been spread throughout almost every part of the civilized world, with a rapidity which stands without example in the history of science;" and no wonder, for a discovery which was "to render the human constitution unsusceptible of a disease so highly contagious, and universally fatal to mankind, as the small-pox, could not fail to attract immediate attention;" but, after all, this "was an event more to be wished for, than expected." And then, to heighten the surprize, and to raise suspicions, in the minds of the uninstructed, he informs us, that all "these important consequences are to succeed a small puncture with a lancet, without producing any material indisposition, and totally free from any risque of danger;" but this, in our author's opinion, "carries with it an air of mystery;" and he is indeed very much surprized, "that it should have been so readily adopted, and carried to such an extent into practice." P. 1 and 2.

It does not seem to be unknown to Mr. Goldson, "that the success of vaccination is often defeated, either by the matter having been taken from a spurious pustule, or by its having suffered a decomposition from a variety of causes; in consequence of which, in the early stages of its introduction, blunders had been committed by many practitioners, who, to use Dr. Jenner's words, took up the lancet without ever having seen the true vaccine pustule. P. 4. Yet, notwithstanding this, whenever he notices these blunders, he takes care to introduce them in such a manner, as to imply some doubts upon the subject. Thus, after informing us, (p. 3) "that many of the vaccinated children were soon afterwards submitted to the influence of the variolous infection without effect," he immediately makes the following assertion. "Several instances, however, of its inefficacy were observed at this period, but all of them," he adds in a very artful manner, "were pronounced to arise from some cause or other, not at all inimical to the regular practice, pursued by the discoverer, and his own immediate friends." This regular practice was not a secret, as is here insinuated; it was publicly known; and every one who did not deem it too great a trouble, might have made himself acquainted with it. If our author had paid a little more attention to it, perhaps he would not have stood

stood in need of asking for further investigation." But I must confess myself at a loss to guess whom he alludes to, when he speaks of the immediate friends of the Discoverer. Surely he cannot call those who first began to practice vaccine inoculation, Dr. Jenner's immediate friends; and therefore, the whole of the preceding passage can be viewed in no other light but that of an insinuation, that the promoters of the vaccine inoculation had formed a plot to enforce the practice upon the public against all reason; or, to use his own words, "to deem every failure spurious, and to conceal it," (p. 62), and thus to class them with their antagonists, who have raised plots, and used means, fair or foul, to obtain their object.

Speaking of the medical practitioners in his neighbourhood, Mr. Goldson is very particular in telling us, that, "they could not remain ignorant of the many instances of failure, which occurred in its infancy. Neither could they help remarking, what must have been obvious to every attentive observer, the apparent instability of the practice. With every fresh instance of a spurious case, they heard of new instructions, and cautions in respect to taking the matter. These instructions deviated occasionally, from the thirteenth down to the seventh or eighth day; and yet they were told, that on this point depended the whole success of the operation." P. 6 and 7.

Wonderful instructions indeed! But I must confess, I never heard of them before. These, I suppose, made their first appearance in the world, when I was abroad, where it could not be expected that every paltry publication which appeared on that subject in England, should come to my hands. But I have seen many similar instructions in Germany. For no sooner did the practice of vaccine inoculation begin to be adopted, than the barbers, who, it is well known, practice surgery in that country, to the great nuisance of society, took up their lancets, and inoculated what they called the cow-pox. The consequences might easily have been foreseen. Several of the children inoculated by them, caught the small-pox afterwards. The poor barbers, perceiving that their medical reputation was at a stake, endeavoured to get out of the scrape in the best manner they could. Some of them were bold enough to insist upon it, that the children had the cow-pox in the most satisfactory manner; precisely as had been described by Dr. Jenner, and others of their own countrymen who had written upon the subject. Then the public was annoyed with their justifications; which, generally, consisted of

of the recital of some of the most prominent symptoms of vaccination, which they copied almost verbatim from the authors who had written on the subject; and I can assure Mr. Goldson, that this was executed in so masterly a manner, as to bid defiance to any which have appeared in this country, upon similar topics. Others again, more conscientious than the rest, contrived to extricate themselves, by making confessions of their little experience; and by pointing out what they fancied, had led them into error. This, in general, was followed by a code of instructions, which varied, perhaps, as much as those that appeared on this side of the water, but which no sensible person paid any attention to; and, I believe, as little regard was paid in England to the instructions Mr. Goldson alludes to. It reflects no great credit on him to bring them forward, either in support of his argument, or as an excuse for the errors he has committed: principally, as at the same time when vaccination was first practised in his neighbourhood, there were instructions to be found in England, which, to the present time, have not varied at all. To convince our author of this, I shall here copy an extract of a letter I received from Dr. Jenner, dated January 23, 1801, not long after the period, when Mr. Goldson had so much cause to complain about "the apparent instability of the practice;" and I earnestly beg of him to compare the instructions it contains, with those which were in the hands of every one, at the time he wrote his pamphlet.

"I shall take the liberty of laying before you certain rules, which, in my opinion, should guide the vaccine inoculator, and I will venture to add, that were we never to deviate, any occurrence out of the ordinary course of the disease would be extremely rare. The third will perhaps explain the principle upon which your matter parted with its original properties.

"First, We must observe, that the pustule go slowly and regularly through its progressive stages of inflammation, vesication, and scabbing; and that the vesication be accompanied with its efflorescence.

"Secondly, That the vaccine fluid be taken from the pustule for the purpose of inoculation at an early period of its formation.

"Thirdly, If, from any peculiarity in the constitution of the patient, or from the state of the virus, a variety should appear in the character of the pustule, that pustule should not be used for further inoculation.

"The necessity of attending to the first of these rules

is obvious: were it neglected, even an exanthematous blush, excited on the arm by the insertion of the virus, might be deemed a sufficient security; and a mere vesicle, quickly forming, and as quickly subsiding, might be considered as the real vaccine pustule, in which we are to place our confidence.

"With regard to the second injunction, I shall observe, that the activity of the virus begins to diminish upon the formation of the efflorescence; therefore, if circumstances will admit, it should not be taken after the eighth day; but the best guide, I think, would be to stop upon the progress of the efflorescence; I do not presume to say, that at this period the virus is effete; certainly it is not; but that it frequently occasions disappointments, my early trials, and those of others, on whose accuracy I can place the greatest confidence, fully evince.

"As a commentary on the third rule, I shall observe, that when we take the vaccine fluid from a pustule, which, in its progress, has materially deviated from its common character, we are very apt to produce a pustule, maintaining that deviation. The texture of the vaccine virus is certainly very delicate, and easily thrown into derangement; so that causes, apparently trifling, are liable to decompose it. I shall mention one to you, by way of illustration. In the early part of my practice, I used frequently to dry the virus *by the fire*, upon threads, glasses, and lancets, but with much caution respecting the degree of heat; yet experience has taught me, that even this procedure frequently occasioned a variation in the progress of the pustule produced by it, as it was apt to commence with a soft creeping scab; which, in some instances, produced at its edges, as it advanced, the perfect vaccine fluid in a ring around it, which fixed a boundary to the extension of the scab. The efflorescence followed, and the constitution was found secure from the small-pox. But, in other instances, the process ended more abruptly, and then of course, the susceptibility of the vaccine virus remained, which was proved by subsequent inoculation.

"I do not find that the vaccine virus undergoes any change, in passing successively from one patient to another for a great space of time. I can answer for its possessing the same properties at the expiration of twenty months, as when it was taken from the cow."

Having given a few specimens of Mr. Goldson's calmness and moderation, I shall next take into consideration, his qualifications as a vaccine inoculator. In endeavouring

ing to exculpate the medical profession in his neighbourhood from the censure they had incurred, he informs us, that the practice was adopted in the autumn of 1800. All this may be perfectly correct; but he does not inform us, that since this time vaccine inoculation has been practiced there so generally, as in other parts of the world. Having lately visited the place of Mr. Goldson's residence, I have had an opportunity of inquiring into the fact; and I find, that, comparatively speaking, vaccination is even now very little practiced there; and when you talk about the cow-pox, you will hear every where the old story, that children will have the small-pox afterwards. Report says, that at the time Mr. Goldson published his pamphlet, which was about four years after the first introduction of vaccination into Portsmouth, Portsea, and Gosport, he had only vaccinated eighty children. Being at the head of his profession, perhaps no other practitioner had inoculated so many. One of the most respectable physicians had inoculated only two; and we may form a just idea of the high estimation in which vaccine inoculation is held by the medical profession in that part of the country, from "the candid and liberal approbation which they unanimously expressed," when the report of Mr. Goldson's cases, with the observations annexed, were read before the quarterly meeting of the Medical Society of Portsmouth, Portsea, and Gosport. When, therefore, he tells us that the cow-pox was known to the medical men in those towns soon after its promulgation, but little practiced, he has been very unsuccessful in clearing them from the charges under which they labour. However, as they are said to have attended to it with a desire to make themselves masters of the subject," (p. 6) it will be worth while to enquire, with what success these labours have been crowned?

P. 9, he says, that "in no instance, he himself has seen any approach to a spurious disease." I believe there are few vaccine inoculators in Great Britain who can say the same. We were indeed very much surprized when we first read that passage; but our surprize was greatly increased when we were afterwards informed by unquestionable authority, that the practitioners in this neighbourhood never take the matter till what they call the ninth day. But as they do not count the day on which the inoculation is performed, what they style the ninth, is in fact the tenth day. Besides, instead of performing their inoculations from arm to arm, they still continue to dry their matter upon lancets; and then use them as occasion requires.

quires. Therefore, instead of never having seen a spurious cow-pox, it may be questioned, whether Mr. Goldson has ever been so fortunate as to see the genuine cow-pox? P. 55. Speaking of the casual cow-pox, he maintains that the bluish cast is the characteristic of the pustule; that in the first vaccination it retains this colour; but that it is not to be distinguished after it has passed once through the human body. In support of this assertion, he quotes Dr. Woodville's authority; and then adds, that it is "a circumstance of some material import; but which has not been sufficiently attended to."

I must beg to inform our author, that he labours under a very great mistake. Medical men have paid particular attention to this point; and their experience has proved, that the bluish cast is not peculiar to the casual pustule; but, that it is frequently observed in the inoculated cow-pox. I have seen it, not only in the early part of my practice, but likewise, after I had been using matter from the same stock for upwards of three years. Dr. Woodville made this assertion in the beginning of his practice; and I am convinced, that long before this time, he must have frequently witnessed the bluish cast in the inoculated cow-pox.

P. 56. When speaking of the similarity of the vaccine to the variolous pustule, he asserts, that the vaccine pustule "does not possess the permanent power of resisting its own reiterated action." I believe some cases are related by Dr. Jenner, of persons being infected a second time with the Cow-pox. But when we can produce a local infection of the small-pox, in a person who has already undergone that disease; surely it cannot be made an objection to the practice, that the same should happen in the cow-pox. But laying this aside, as Mr. Goldson appears to have a turn for making experiment; I would advise him, to try to infect children a second time with the cow-pox; and he will find, that it is not so easy a matter, and that the cow-pox possesses in a much higher degree than the small-pox, "the permanent power of resisting its own reiterated action." I have made the experiment in several instances, and never have been able to produce the disease a second time but once. I have tried it upon myself; for although I have had the small-pox, I once produced the true vaccine pustule upon my hand. Since that time I have reinoculated myself upwards of a hundred times with cow-pock matter; but have been unable to infect myself again.

(No. 68.)

X

P. 56.

P. 56. He talks very learnedly upon the origin of the cow-pox; yet, it is quite unknown to him, that Dr. Jenner, or any one else, since his publication, has ever prosecuted the idea. To the names and labours, therefore, of Mr. Tanner, Drs. Loy, Sacco, and La Font, he is an utter stranger. Had Mr. Goldson made himself acquainted with the experiments of these gentlemen, he would have known, that it appears very doubtful still, whether it is requisite that the matter of the grease should pass through the nipple of the cow, to produce the desired effect in the human body.\* With regard to the experiments he proposes, of inserting the morbid matter from the horse's heel into the nipple of the milch mare, I dare venture to foretell, that it would produce nothing at all; since the experiments instituted by Professor Vibourg, in the Royal Danish Veterinary School at Copenhagen, have clearly proved that the grease is not infectious in the horse. He took matter of the grease, and endeavoured to infect the heels of sound horses; he tried various means; such as inoculation, rubbing the heels with the matter, after having shaved off the hair; blistering the parts, and then applying compresses of lint, which had been previously soaked in the matter, &c.; but all his trials proved unsuccessful, no infection took place.† We may therefore safely conclude, that Mr. Goldson's proposed experiments would be attended with similar results.

As a proof how well Mr. Goldson is instructed in every particular, respecting vaccination in his own country, he confounds the Royal Jennerian Society with the Vaccine Pock Institution; and, in his answer to Dr. Walker, in the Medical and Physical Journal, he calls the Doctor the principal vaccinator under the directors of an institution to whom the pamphlet was respectfully addressed.

From the above specimens of our author's erudition in vaccine inoculation, we may form our judgment, how far he was qualified to bring before the public the work under consideration.

But

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\* Professor Wollstein of the Veterinary School at Vienna, has informed me, that what the French call *javarre*, is not the grease; the latter is an erysipelatous inflammation of the horse's heel; whereas, the former is a caries of the bones, belonging to those parts.—It is therefore easily accounted for why the experiments with matter from the *javarre* has proved unsuccessful in France.

† See Pfaff & Scheele Nordisches Archiv für Natur und Arzneiwissenschaft. B 1. St. 3. Seite 569, 570.



But we are now come to the most important part of the subject, viz. the consideration of the author's proofs, in support of his argument, that vaccine inoculation only proves a temporary preventive against the small-pox. These are illustrated by eight cases; in which the small-pox is said to have happened subsequent to vaccination. Of these, however, four only can be considered to have occurred in his own practice; for Case i. was vaccinated by Mr. Paytherus; Case iv. and v. by Mr. Weymouth; and Case vi. by Mr. Rickman.

The matter used for these inoculations was sent to Mr. Rickman, Surgeon of the division of Marines, by the sick and wounded board; and he made use of it upon five marines. From these he took matter for his own patients; and likewise supplied Mr. Goldson and other Practitioners in the neighbourhood. Whether this matter has not been the source of all the mischief still remains doubtful. Mr. Goldson contends, "that it is not to be presumed that a public board, directing experiments to be made upon the subjects in an Infirmary under their controul, would be so inattentive, as to send such as was improper for that purpose," p. 46. There was not the least occasion for laying so much stress upon this; no body will suspect, that they would send spurious matter intentionally. However it is a fact, I believe, not unknown, that about that period, viz, in autumn 1800, the matter which was in circulation in London, was of a very suspicious nature; and that it was even propagated by some eminent practitioners of the metropolis. And if we take Mr. Rickman's own testimony for granted, perhaps little doubt will remain upon the subject; for in conducting his experiments he "soon found, that the matter ran rapidly into a purulent state after the eighth day; of which he advised the board." p. 49. The experienced vaccinator knows well, how rarely this is the case in the true vaccine vesicle. From my own practice and experience, I am induced to believe, that the true vaccine vesicle never goes into suppuration, except when locally irritated. If you inoculate a very young child, that has not the sense of scratching itself, and care is taken by the nurse not to injure the arm, the vesicle will never pass into suppuration. The matter contained in it will, as it were, congeal; and form a crust similar in form to the original vesicle. In the small-pox the case is different; the fluid contained in the vesicle changes from a limpid into a purulent matter. This is the greatest dif-

ference which I have been able to discover betwixt the vesicles of the two diseases.

To this testimony I can add, that it is confidently asserted, that the matter which Mr. Rickman has given to several practitioners in Portsmouth and Gosport, has proved ineffectual; as has been demonstrated by subsequent inoculations. For the sake of humanity, I think it a duty incumbent on the gentlemen to whom this has happened, to come publicly forward, and testify the fact.

On a question of such importance as that under consideration, and which, in Mr. Goldson's opinion, "ought as soon as possible to be determined," no circumstance should have been omitted, that could in the least have elucidated the subject. A faithful Narrative or Journal ought to have been given of the Cases, in which the matter sent by the Board was first tried; then some judgment might have been formed, whether the matter had produced the desired effect or not. The same ought to have been observed, in every subsequent case, in which the small-pox was said to have taken place after the cow-pox. To these particulars, however, the Author has paid but little attention.

Not a word is said of the five marines, who were first inoculated with the matter. Two subjects, who were immediately inoculated from these five, were afterwards affected with an eruptive disease, which was pronounced to be the small-pox. Mr. Goldson has been pleased to give the Cases relative to these two subjects a place in the latter end of his pamphlet; although, in my opinion, an accurate delineation of the symptoms which occurred, both when they were supposed to labour under the cow-pox, and afterwards, under the small-pox, would have greatly tended to the elucidation of the subject; and deserved to have been related the first of all. But Mr. Goldson says, he lays no material stress upon these cases, nor wishes to draw any inference from them. (p. 40.) For my own part I must declare, that I am unable to draw any; for the proofs here offered, that the subjects had the cow-pox, are equally unsatisfactory as those of their having had the small-pox. As I consider one case, as it now stands, unconnected with the other cases related by Mr. Goldson, I shall offer a few remarks upon it here.

From one of the five marines, Mr. Rickman inoculated *Clarke* (Case 6th.) on Nov. 4, 1800. Whether this man had the cow-pox or not, it is difficult to determine; for although nothing had been said of the appearance of the  
cow-

pox in the five marines, we are told that "there was no apparent reason to suppose that he had not received every benefit from it, as he (Mr. Rickman) noticed no difference in the appearance of the arm, or the symptoms, from any of the former."

On the 18th of November, he (Mr. Rickman) vaccinated a child, Sarah Smith; as one of the punctures was rubbed off very early, he did not think it proper to note this, as a characteristic case." (p. 41.) Mr. Rickman had no right to draw this conclusion; for as he specifies *one* of the punctures, it follows he must have made *more*; those, therefore, that were not rubbed off, would have proved a sufficient preventive, had the matter been good.

This child, however, caught an eruptive disease, which was deemed the small-pox. But Mr. Goldson himself expresses some doubts whether it was the small-pox; for, he "was struck with a peculiarity in their appearance, which was extremely evident on comparing them with a child in the house adjoining. In each the number was nearly the same; yet they were more prominent and forward in the one than the other." (p. 42.) Nothing is said of the child's constitutional symptoms, nor how long this eruption continued. With matter taken from this child, Clarke was inoculated on March 24, 1802. He sickened on April 1, and an eruption took place; but whether this was the small-pox or not, is equally obscure as in the former case. Mr. Goldson saw him as early as "the third or fourth day at farthest," and confesses that the pustules were "more matured for the time than might be expected. They were likewise remarkably conical, an observation he had made in the child from whom the matter was taken. The arm had at the same time, a very different appearance from the common small-pox arm; as there was an unusual livid appearance in the maturation of the puncture." (p. 43) "The peculiar appearance of the pustules, connected with what he considered an unusual aspect in the arm, induced him to write to Dr. Jenner on the subject, conveying the suspicions he entertained at that time, of its being an anomalous case of varicella." (p. 44.)

It is barely mentioned that Clarke sickened; but we are not told how long this sickness or the pustules continued. The only additional evidence which is given of its being the small-pox, is, that matter was taken from him, which produced evident proofs in several instances. These several instances are not related; perhaps it produced such a small-pox, that every one who saw it would be surprized

with its peculiar appearance, accompanied with an unusual aspect in the arm; the eruptions not maturing, and disappearing in six or seven days, as we shall find to have happened in most cases, which Mr. Goldson considered to be the small-pox.

Upon the whole then, from the inaccurate and careless manner in which this case has been described, no inference whatsoever can be drawn.

In the same light I consider Case iv. and v. which occurred to one Mr. Weymouth, a gentleman who makes a very conspicuous figure in the pamphlet, as an antagonist to vaccine inoculation. No case of failure is quoted by our author; but he calls upon the authority of his friend, Mr. Weymouth, who is always ready to second him.

In Case iv. a child was vaccinated by this gentleman, on March 18, 1801; and the easiest and best proof he gives of the child having had the cow-pox, is, "that the arm inflamed, and put on every appearance described by Dr. Jenner." (p. 36.) But notwithstanding this, when the child was inoculated, thirteen months after, with the small-pox, it caught the disease, became feverish, and had several pustules. Unfortunately, however, one pustule only matured; but from this one he tinged two lancets, and inoculated two children, both of whom had the small-pox in the most satisfactory manner. I have not the least doubt of it; the pamphlet affords us many opportunities of judging what this gentleman means, when he speaks of having the small-pox in the most satisfactory manner.

Case v. is nothing more or less than a local affection of the small-pox after the cow-pox. There was no eruption whatsoever, but the child had a smart fever. It is hardly worth while to dwell upon this case. The fever was evidently produced by the local irritation, and the same would have happened had the child had the small-pox. Instances of similar local infections after the small-pox are upon record without number; and to bring such a case forward, as an instance of small-pox subsequent to vaccination, betrays no great information, either on the part of our author or of Mr. Weymouth. Mr. Goldson pretends not to lay much stress upon them, (p. 35), why then were they published? or, how can he expect that any one else will lay much stress upon them?

As no conclusions can be drawn from the above cases, I shall take no further notice of them.

With regard to the other cases, which we are now going to consider, the same want of accuracy is conspicuous throughout

throughout the whole. We have every reason to call in question the purity of the matter which was used; the proofs that the children had the cow-pox, are indeed too vague to be satisfactory; and whatever Mr. Goldson's erudition may be, on other subjects, his knowledge of vaccination amounts to little more than nothing; so that we cannot deem his authority as satisfactory. We must therefore leave it undecided, whether the children have had the cow-pox or not; but as Mr. Goldson has given us ample proofs, that the cases which he considered to be the small-pox, were diseases of a different description, we shall, in the subsequent remarks, direct our chief attention to that part of his pamphlet.

Case 1. is of a child inoculated with the small-pox, three years and three months subsequently to vaccination. The effects of this latter inoculation were as follows: the arms inflamed, suppurated, and an areola was formed round the parts. On the 26th, "The suppuration was manifestly increased, and the areola was become extremely florid and radiated; bearing evident marks of absorption. The child was pale, not warmer than usual, but its pulse were quicker than *they* should have been, or than *they* ever had been before." These febrile symptoms prove nothing, as they may proceed from local irritation.

When Mr. Goldson asked the parents, "whether the child had been ill during the night, or whether they had observed any kind of appearance on the body. They instantly shewed him six or seven eruptions." It appears very strange to me, that Mr. Goldson should have asked this question; for he informs us that three of these pustules were on the child's forehead and temple, and one on his nose. Had these been the true small-pox pustules, I believe they would have been visible enough without asking.

In the evening of the same day, Mr. Goldson was sent for again; and he found the child in "a high degree of fever, his countenance much flushed, and there was a considerable efflorescence on both arms," which Mr. Goldson considered to be "the rash, which is observed in the inoculated small-pox. Two or three eruptions, of the same kind as those seen in the morning, were readily distinguished through the efflorescence."

It is nothing very astonishing, that a fever should take place in consequence of a local irritation; and this might have been the case here. But there cannot be the least doubt, that the fever in this case was greatly aggravated

by the anxiety of the parents; for Mr. Goldson informs us, that the friends began to be alarmed, (p. 13); and that he "perceived the anxiety of the parents led them to watch him with an inquisitive eye." (p. 14) Accordingly it so happened, that on the evening when Mr. Goldson was sent for in haste, the child had been seized with a cold shivering, or, as the author expresses it, "with a violent rigor," which frightened the parents so much, that they pampered the child with hot wines and flannel. We need not wonder, therefore, that Mr. Goldson found him in the state above described, with fever, flushed countenance, &c. With regard to the account of the servants, that he had been delirious the preceding night, no dependance whatsoever can be laid upon it. "Thursday 29, Instead of suppurating, the eruptions were covered with a warty scurf," which is three days after their first appearance, and "this encrustation was rubbed off on the following evening.

Mr. Goldson informs us, that when the history of this case reached London, the opinions of Messrs. Ring, Paytherus, Dr. Willan, and the Medical Society in Bolt Court, differed from that of the medical gentlemen in his part of the country. They all agreed that the attempt to excite the small-pox had failed. "They had likewise no doubt, that the same train of symptoms may be excited in persons who have passed through the small-pox, either in the casual manner or by inoculation." (p. 17.)

Mr. Ring, in his letter to Mr. Grant, has entered more fully upon the subject; and given satisfactory proofs that the case in question was not the small-pox; however, it appears, that Mr. Goldson has shut his eyes and ears to conviction, and persists in his former opinion. He particularly notices an observation of Mr. Ring, which, he says, experience does not confirm; viz. that the sudden disappearance of the pustules "is a sufficient proof that it was not the small-pox, *which always continues a longer time.*" In answer to this, our author proceeds thus: "We well know, that in many instances the inoculated small-pox does not mature, but retires in a few days; although the patient be perfectly secure. And, as I before observed, one of the gentlemen who saw Mr. Grant's child, remarked, that he had very lately inoculated one, where the appearance of eruption was not greater than in that instance." (p. 19.) I am exceedingly sorry I cannot subscribe to this opinion of Mr. Goldson and his friend. Mr. Ring's assertion is perfectly just; the true variolous eruption

tion goes through a regular course, and always continues a longer time; and no dependance can be placed on an eruption which never suppurated, and only lasted three days. Perhaps, at some future period, we may hear a little more of the case Mr. Goldson's friend speaks of; and then the public will be entertained with a marvellous history of a second infection of the small-pox, in the same manner as we now are with our author's cases of small-pox subsequent to vaccination.

(P. 22.) Mr. Goldson "appeals to the candour of the profession, whether the cases of eruption, pimples, &c. arising from inoculation, in persons who have passed thro' the small-pox, were ever known to bear any kind of proportion to what has occurred in variolous inoculation after the cow-pox?"

This question is asked under the prepossession, that these pustules really were the consequence of inoculation. I am far from being of that opinion; neither can I subscribe to the idea, that the eruption in this case was a sympathetic affection of the skin. I look upon it to have been occasioned merely by accidental infection, from the child having scratched itself, as is daily observed to happen in the cow-pox; for Mr. Goldson informs us, (p. 12) that on Friday the 23d, the fourth day after inoculation, he "found the arm of the eldest had been rubbed in the night, and had discharged some lymph on the linen;" and that the inflammation was considerably increased. In short, the child had scratched its arm, and, with the infected nails, produced the few pimples in question. Again, (p. 23) "During the night of Sunday, the inflammation of the arm rapidly increased." This is another proof that some irritation had been applied to the pustule; for in the small-pox, as well as in the cow-pox, the inflammation proceeds gradually and slowly. During that same night the child was very restless; which by the servants was termed delirious. I am moreover inclined to adopt this opinion, on account of the very short duration of these pimples; and of their being so small that even Mr. Goldson, who was looking out for them, could not see them, till they were pointed out to him.

(P. 22) He further ventures "to appeal to the candour of the most zealous promoters of the cow-pox, whether this circumstance is not very rare, if it does ever happen, when inoculation takes place at an early period after vaccination?" Here I am rather at a loss to understand the author's meaning. If he means the small-pox, nothing but

but a direct negative can be given. If he alludes to the eruption; in the manner I have above explained it, it may happen in any case; but besides, such a transient eruption may be produced from a sympathetic affection of the skin, even in persons who have had the small-pox, and consequently it may happen in persons who have had the cow-pox. Or, if Mr. Goldson alludes to the inflammation of the arm, and the febrile symptoms, as I am inclined to think he does, from his subsequent remarks, I can answer him in the affirmative. For although, perhaps, no such cases may be found in Dr. Jenner's publication, they are to be met with in the works of others. Has Mr. Goldson forgotten, or has he never heard of the case of a child called Blondeau, at Paris; which happened a little while after vaccination was introduced in France, and which his predecessor, the famous Vaume, laid so much stress upon, as a case of small-pox subsequent to vaccination? I need not repeat it here, for Vaume has taken care that it should be public enough; but I can relate several which occurred in my own practice, and one in particular, which in Germany made as great a noise, as that of Blondeau in France. Among the first children I inoculated, were those of one Börner, a barber-surgeon in Altona. This gentleman, anxious to gain reputation, took matter secretly from his children, at a period too far advanced, and inoculated several others in his neighbourhood. A short time afterwards, some of these children caught the small-pox, and one of them died. The sensation this created, can easily be conceived. The antagonists to the practice were particularly active, as is the case in general; and, to make it appear of greater moment, it was reported that the matter was taken from children whom I inoculated. After I had enquired into all the particulars, I published them in the *Altona Mercury*; and exposed Mr. Börner's ignorance. This enraged the gentleman so much, that he immediately inoculated his own children with the small-pox; which was about five months after I had inoculated them with the cow-pox. Even at this early period after vaccination, a local infection took place; and one of the children had a slight attack of fever; but no eruption took place. Mr. Börner's subsequent conduct may easily be guessed: he publicly proclaimed that his children had the small-pox; and there were no Mess. Weymouths, or Seeds, or Hills wanting, to support his cause. Their loquacity, however, was soon silenced by better and abler judges. Since that period I have seen several other instances of local infection



tion a short time after vaccination. Indeed, most of my reinoculations were performed very early after my patients had the cow-pox. In the early part of my practice I was obliged to do it, for the satisfaction of the public; but latterly I have left it off entirely. The two last children I reinoculated was a few months after vaccination. I took them to a room where six children were confined with the confluent natural small-pox. I inoculated each child with three punctures on both arms; and left them upwards of an hour in the same apartment, to breathe the variolated atmosphere. In both children the punctures took effect; and six beautiful pustules were formed upon their arms. One child complained a little on the evening of the seventh day, and vomited. The parents were inclined to attribute this to the child's having eaten some unripe fruit that day; but whether it was owing to this cause, or to the irritation of the pustules, I cannot decide; for the child was perfectly well the next morning, and on the tenth day, the pustules in both dried up, without any farther consequence.

(P. 24) He says, "If the same had arisen from an accidental infection, no one would have ventured to doubt." Mr. Goldson is perfectly mistaken, for such cases have occurred to Dr. Woodville, and to Dr. Ballhorn and Mr. Stromeyer at Hanover; not three years after vaccination, but only a few days. The antagonists to vaccination proclaimed that it was the small-pox. Dr. Ballhorn and Mr. Stromeyer, however, cleared themselves from this imputation; but, being led astray by theory, or rather a preconceived idea, they looked upon it as a vaccine eruption. I shall soon have an opportunity of taking more particular notice of these cases.

Case II. III. and the two related in the postscript, are cases in which an eruptive disease, considered by Mr. Goldson as small-pox, occurred, in consequence of exposure to the variolous contagion, subsequent to vaccination.

Case II. is of a child four months old when vaccinated; and we are informed, that since that period she has not been prevented from going where the small-pox might have been. However, she withstood the variolous infection, till she was laid in the same cradle with a child labouring under the small-pox, three years and three months subsequent to vaccination.

Case III. is relative to the child, on whom the manoeuvre of the nightcap was performed, but without success; it was, however, infected at school, three years after it

it had the cow-pox. The two cases in the postscript are said to have resisted the variolous contagion in the same manner for some time. When the children had the supposed small-pox, the child in Case 11. had a fever from Thursday till Saturday noon; and on Sunday seven distinct eruptions appeared. Nothing is mentioned of the external character of the pustules; they only lasted five days, and never matured.

In Case 111. there were upwards of a hundred eruptions, several of which were pustular, and already far advanced towards maturation, on the fourth day of the eruption; the first day on which Mr. Goldson saw the child. They dried off as early as the seventh day. It is said, that previous to the eruption, the child was unwell from Wednesday till Saturday, and even that it had a considerable fever. However this fever cannot have been so very considerable, as the mother of the child was not in the least alarmed; and only considered it to arise from cold. The only thing she thought necessary for the child's relief was to keep it in bed, and give it some diluting drink.

In the Case related, p. 66, the child was feverish from Wednesday till Friday; and the eruptions made their appearance from Friday till Sunday. "They were mostly small, but prominent; and all of them, about twenty in number, went off on the sixth or seventh day. None of them matured, but some of them exuded a small portion of lymph; which incruited on the apex, and gave them a warty aspect."

In the Case p. 68, the child was complaining and feverish from Monday till Friday; and from Wednesday till Saturday, eruptions, twenty-five in all, appeared. "The eruption on the pubis had a white, glassy appearance, as if it contained a fluid; but it never became perfectly pustular like other cases. The apices of most of them exuded a small quantity of lymph, which incruited; and they gradually died away after the seventh day."

In support of his opinion, Mr. Goldson informs us, that several of the most respectable practitioners in his town, among which Messrs. Weymouth, Hill, and Seeds are not omitted, were witness to the above cases, and that they did not hesitate to pronounce them to be "the effect of variolous contagion."

This is all very well; and I shall not contradict these gentlemen. I myself am firmly convinced, that it was the effect of variolous contagion; but it is far from my opinion that they were cases of small-pox, as Mr. Goldson supposes;

supposes; and I firmly believe, that under similar circumstances, the same train of symptoms would have been produced in persons who had already undergone the small-pox. There is nothing very extraordinary in this; for I believe it is well proved, that although a person may have had the small-pox, the skin will retain the susceptibility of being infected, when again exposed to the variolous contagion, and a local eruption will take place, frequently attended with fever, and other symptoms of irritation. This eruption has obtained several denominations. The French call it, *petite verole volante*; the Germans, according to the variety of its external characters, have called it *wasser-pocken*, *wind-pocken*, *schaaf-pocken*, *swine-pocken*, &c.\* the English, in general, have called it the chicken-pox; and sometimes the spurious, or bastard small-pox. In Latin it has been styled *varicella*. But it signifies little by what name we call it; it is sufficient for us to state, that medical records abound with cases of spurious eruptions, produced by the variolous contagion; which, before the discovery of vaccine inoculation, were frequently mistaken for the small-pox, and looked upon as a second infection; and since that discovery have as frequently, either been considered from ignorance, or misrepresented from a spirit of opposition, as cases of small-pox subsequent to vaccination.

To obviate any rash decisions in future, it will not be amiss to relate a few instances.

Huxham informs us, that he has known several cases of variolous infection in persons who had the small-pox formerly, accompanied with a general eruption very similar to the small-pox, but not attended with fever. He observed this particularly in nurses, and other persons attending upon small-pox patients.

Hensler, formerly a practitioner in Altona, and at present a Professor of the University of Kiel, once a strenuous defender of the small-pox inoculation, at the time when this practice was first introduced into Germany, relates several cases of this description. He mentions, that a child had the small-pox at the same time with an elder sister; that four years afterwards she was infected again by a younger sister, who died of the small-pox. She was feverish for three days; when a general eruption broke out, consisting

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\* Water-pox, wind-pox, sheep-pox, and swine-pox.

consisting of pustules containing a limpid matter; but they only lasted five days.

Another similar case is that of a woman, who having had the small-pox when young, attended upon one of her children labouring under the confluent disease. She was seized with a violent fever, which lasted twenty-four hours; when six large pustules made their appearance, containing a thin purulent matter. They stood eight days; and did not dry up till a considerable time after.

The following interesting case, related by the same author, shews that the variolous contagion has the power of locally infecting the skin, even when it cannot exert its influence upon the constitution. A lady, who had one of those constitutions which, upon every occasion, had resisted the variolous contagion, and was therefore deemed unsusceptible of the disease, when nursing her child while labouring under the small-pox, was accustomed to make it lean against her cheek; in consequence of which, an eruption of twenty pustules appeared upon her cheek and breast. These pustules disappeared in four days.\*

The same is corroborated by Hufeland, who says he has frequently observed, during an epidemic small pox, that when children, who never had the small-pox, slept with others labouring under that disease, instead of being infected with the real small-pox, they were only attacked with a spurious eruption. This eruption, he informs us, was attended with fever, and consisted of pustules containing purulent matter; but as they did not go through their regular course, he did not hesitate to pronounce them spurious; and the event proved he had not been mistaken, for several of these children afterwards caught the real small-pox, and some even during the same epidemic.†

This spurious eruption, proceeding from variolous infection, has been more frequently mistaken for the small-pox than we are aware of. Thus, there are several cases of eruption subsequent to vaccination, to be found in Dr. Woodville's Report, which have been erroneously taken for the small-pox from previous infection; when, in fact, they are nothing more than eruptions of the same nature

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\* Hensler *Über die Einimpfung der Kinderblatter*, 2ter Th. s. 212.

† *Bemerkungen Über die natürlichen und geimpften Blatten von Dr. C. W. Hufeland*, 1793, p. 52.

as those above related. The following are the cases I allude to.\*

Richard Payne, (Case iv.) tenth day. The pustule was surrounded with a dark inflammatory circle. Fifteenth day, five pustules made their appearance.

William Mundy, (Case xv.) thirteenth day. The pustule was surrounded with an extensive efflorescence in the form of a circle. About the fourteenth day, there appeared several pustules upon his neck and back; they disappeared however in two or three days, without suppuration.

Hannah Hull and Sarah Hull, (Cases xxxi. and xxxii.) In these two sisters, the disease terminated far more favorably than in their brother William Hull; for in both cases, the pustule was surrounded with an efflorescence on the eleventh day; and the number of pustules that appeared in both, was not at all to be compared with those which appeared in their brother; the symptoms which accompanied the eruption in them were likewise of much shorter duration than in their brother.

Maria Murrell, (Case xxxix.) tenth day. The pustule was surrounded with a diffused efflorescence. Twelfth day, about twenty pustules appeared. Fourteenth day, the pustules appear to dry up.

Richard Colloway, (Case xlv.) twelfth day. An extensive shining redness surrounded the pustule. At the same time some pustules appeared; their number, however, did not exceed twenty.

Peter Peters, (Case lxxxi.) The efflorescence appeared on the eleventh day; twenty-four pustules appeared, which were all very small.

Sarah Hat, (Case lxxxvi.) eleventh day. The pustule was surrounded with efflorescence. The number of pustules which appeared was about forty.†

The efflorescence which surrounded the pustules in all these cases evidently prove, that no previous infection had taken place; and that the cow-pox had exerted all its influence upon the system. With regard to the subsequent eruptions, it evidently appears from the shortness of their duration,

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\* Not having a copy of the English original by me, I am obliged to content myself with translating the following extracts from notes taken by me some years ago from a German copy of Dr. Woodville's Reports. It cannot, therefore, be expected, that I shall hit precisely on the same words which Dr. Woodville has made use of.

† Reports of a Series of Inoculations, &c. by William Woodville, M. D. London, 1799.

duration, their smallness in size and number, that it was not the small-pox, although there cannot be the least doubt that they proceeded from exposure to the variolous contagion.

In the same light I look upon the eruption mentioned by Dr. Ballhorn and Mr. Stromeyer, which these gentlemen mistook for a subsequent suppurative vaccine eruption (*eruption vaccine subsequente suppurative*); for in the cases in which it appeared, there were children in the neighbourhood, and even in the same house, labouring under the small-pox. An antagonist to vaccine inoculation, at Hanover, published in Hufeland's Practical Journal, vol. x. p. 186, one of those cases as an instance of small-pox subsequent to vaccination; and Mr. Ring considers them as cases of small-pox from previous infection.\* In justice however to Dr. Ballhorn and Mr. Stromeyer, whatsoever may have been their error, in supposing it to be a suppurative vaccine eruption, I think they have clearly proved, that it was not the small-pox; for they inform us, that when the children had the cow-pox, the pustules on the arms were surrounded by an efflorescence; which could not have taken place had they been previously infected with the small-pox. With regard to the eruption, it resembled the chicken-pox, and was very different from the small-pox, for, "1. The pustules on this eruption were not so broad as in the small-pox. 2. The matter contained in them was more lymphatic than purulent. 3. The number was smaller than is generally the case in small-pox. 4. They had no depression in their apex, as is the case in the small-pox before they suppurate. 5. The scabs, which remained for some time after the pustules dried up, were smaller, thinner, and had a yellow colour; whereas the scabs in the small-pox are of a brownish colour. 6. Some days after they dried up, which generally happened about the sixth or seventh day, hard lumps appeared on the spots which had been covered by the pustules: 7. Which lumps at last went off without leaving the smallest mark behind; and nothing remained but brownish spots, which disappeared after some time."†

It is rather surprizing that Dr. Ballhorn and Mr. Stromeyer should have mistaken the nature of this eruption; for I have no where met with any description, where the distinctions

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† *Traite de l'Inoculation Vaccine, &c.* par M. Ballhorn, M.D. Medecin de la Cour, & Mr. Stromeyer, Chirurgien de la Cour a Hanovre, 1801.

\* See *Treatise on the Cow-pox, &c.* by J. Ring, Part II. p. 761 & 765.

distinctions between the chicken-pox and the small-pox are so well marked.

That the cases related by Mr. Goldson are perfectly of the same nature, will appear more evident from the following considerations.

I. This eruption was of a much shorter duration than is observed in the true small-pox. Case II. terminated its course in five days; and the remaining cases in seven days. Thus, about the period that this eruption disappeared, the real small-pox would hardly have begun to mature.

II. None of them ever matured, Case III. excepted; but in this case the eruption was too forward; for Mr. Goldson informs us, that as early as the fourth day, several were pustular, and well advanced towards maturation: indeed, they were so far advanced, that in three days after, the whole of them had disappeared. But even maturation would be no proof of its having been the small-pox, for in several of the cases of spurious eruption above related, the pustules contained purulent matter.

III. As these cases never matured, they never could have passed through the regular stages, so well marked in the small-pox even in its mildest form. About the third or fourth day of the fever, eruptions make their appearance; first, in the form of small red spots, hardly elevated. These gradually increase in size; and after two or three days more, form a small vesicle, which is surrounded by a circular inflamed margin, and contains a clear limpid fluid. For the three or four succeeding days the pustules become larger, more elevated, and acquire their proper figure and size. At the end of this period, the clear limpid fluid contained in the vesicle, is changed into a purulent matter. After a few days more the pustules break, and discharge their matter; which is formed into a crust upon their surface; and lastly, after some time, these crusts fall off, and leave reddish brown spots on the skin below. Had any of Mr. Goldson's cases gone through such a regular course as this, I believe he would have done so much justice to his own cause, as not to have omitted that circumstance.

IV. Neither in Case II. or III. is any thing said, with regard to the external characters of the pustules; but in the cases related in the postscript, Mr. Goldson touches upon this point; and gives us evident proofs, that they were not the small-pox. The eruptions were small, prominent, and had a whitish glassy appearance, as if they contained a fluid; they exuded a small quantity of lymph,

( No. 68. )

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which encrusted on the apex, and gave them a warty appearance. If at the same time we take into consideration, that they never matured, and only stood seven days; we can no longer doubt but they were cases of genuine vari-cella.

Perhaps it will be urged, that a fever of three or more days duration occurred in these cases. True, but this does not prove that it was the small-pox. The fever here, was produced by the general irritation; and happens frequently in these spurious eruptions, as we have seen in the cases related by Hensler. Hufeland says, he has seen such cases attended with fever, and a violent delirium; and adds, that even a secondary fever proves nothing; for that it frequently is wanting in the true small-pox, and, on the contrary, is often observed in the spurious, in consequence of irritation.\*

The greatest objection, however, made against us will be, that Mr. Goldson took matter from Case III. about the end of the fifth day; and charged four lancets, with which four children were inoculated.

We shall therefore pay particular attention to the result of these inoculations.

Mr. Goldson's own patient was a delicate child, about six months old. It had considerable fever and rash; which was preceded by two or three convulsions; when he could not discover more than eight or ten eruptions, four of which matured, and all went off on the seventh day.

Of the children inoculated by Messrs. Weymouth and Cooper, one had fifty, the other more than a hundred pustules; these likewise went off in seven days.

The subject inoculated by Mr. Seeds, was a strong and plethoric child at the breast; it had considerable fever, with extensive rash, and more than a thousand pustules; most of which did not turn till the ninth or tenth day.

That morbid matter, whatever may be its nature, when introduced into the human frame, should produce a series of morbid symptoms, is natural to expect. When, therefore, such matter was introduced into the body of a delicate child, only six months old, we need not be surprized at its having fever and convulsions.

With regard to the children inoculated by Messrs. Weymouth and Cooper, no mention is made that they had any fever. If they had any, Mr. Goldson would have mentioned

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\* Hufeland *Über die Blattern*, p. 53.



mentioned it; for he is very particular in taking notice of this symptom in his own case, and in that of Mr. Seeds. We therefore must conclude, that these were cases of small-pox, similar to those that once raged in France, in the time of Ettmuller, who very gravely tells us, that the small-pox in France is not accompanied with fever.

The child inoculated by Mr. Seeds had more than a thousand pustules. If these pustules were of the common size of small-pox, this child, who was only eight months old, must have been covered from top to toe; so that I cannot conceive how it was possible for Mr. Goldson to distinguish the extensive rash he talks of. However, in such violent cases of small-pox, there are in general other symptoms attending it, which are not mentioned here; such as, pain at the pit of the stomach upon pressure, swelling of the face, and afterwards of the hands and feet, secondary fever, discharge of saliva, hoarseness, difficulty of swallowing, &c. But we need not wonder at all this; the effect these inoculations produced was as much as could well be expected: the matter was taken from a case of varicella, which terminated its course in seven days, and produced a disease which likewise terminated in seven days, in three cases out of four. That the eruption in the fourth case was protracted two days longer, is only an accidental circumstance, and easily accounted for, the child being strong and plethoric. But independent of this, the number of pustules, and their duration, by no means prove that it was the small-pox. I have frequently witnessed cases of varicella, where the pustules were as numerous, lasted a longer time, and left marks behind like the small-pox. Lest my authority should be deemed insufficient, I shall quote that of an abler judge. Mr. Ring, in his *Treatise on the Cow-pox*, p. 829, mentions, that many persons have seen the chicken-pox in some measure confluent; and that he himself has known a considerable number leave a cicatrix behind. In p. 835, he relates an instance of a child, in which the eruption was not complete until the tenth day; and the last vesicle did not disappear till the fourteenth.

These last inoculations, therefore, with matter taken from Case 3d. instead of removing our doubts, only tend to increase them; and give us convincing proofs of Mr. Goldson's mistaken notions. Should he persist in them, and reason be now insufficient, time will probably convince him of his errors when it is too late, when the unfortunate subjects of these experiments will be snatched

away from their deluded parents, and fall victims to that dire disease the small-pox.

Should this indeed unfortunately take place, it would not be the first time that thousands have been deceived in this respect, from having paid too little attention to the distinctions between the variola and varicella: and when we consult medical records, we too often meet with blunders, which reflect little honour on the profession. Mr. Ring has related several cases of this description; and if Mr. Goldson had consulted them, perhaps he would have been rather more circumspect in making experiments. Among others, there are two cases communicated by Mr. Paytherus, where an elderly surgeon inoculated his granddaughter with supposed variolous matter; "and showed the case to his friends, as one of very mild small-pox. Mr. Paytherus having expressed his doubts whether the disorder was the small-pox, gave great offence. About three years after, the young lady had the small-pox of the confluent kind."

"This man of Ross pronounced another case of chicken-pox, concerning which he was consulted, to be a case of small-pox. Mr. Paytherus informed the parents, it was nothing but the chicken-pox; and, inoculating the patient soon afterwards with proper matter, produced the small-pox."

Mr. Ring adds another melancholy instance, which occurred in town some years ago. "A lady, who was going abroad, had her daughter inoculated by one of those impostors who, having swept out a drug-shop for some years, called himself an apothecary. When the young lady returned to England, she caught the small-pox, and died."\*

Dr. Lettsom, in his observations on the cow-pox, as quoted by Mr. Ring, observes, that he had lately attended two young persons under the small-pox, each an only child of considerable family, who had been inoculated two or three years before by respectable men; and the mothers of the children shewed him, "what they conceived to be the marks, or pitting, from the inoculated small-pox. Happily they both recovered from an alarming eruption of the disease;" but, he adds, "Two relations I once claimed, who were inoculated with matter supposed to be variolous, by an eminent inoculator, afterwards caught the small-pox,

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\* Ring's Treatise, &c. Part II. p. 833.

pox, and to one of them it proved fatal."\*. I could add several other cases, which have happened in our times.

But we need not confine ourselves to our own times; we find such cases in older authors. Monro the grandfather, in his history of the small-pox inoculation in Scotland, says, that he knows several instances of the bastard kinds of small-pox, as he calls them, having been mistaken for the true small-pox. Both Cullen and Heberden maintain that medical men were often deceived by the chicken-pox, from its assuming the appearance of the small-pox. Fritze, in his *Medical Annals*, says, he has seen so great a similarity between the chicken-pox and small-pox, that he had very nearly been led into a mistake, and taken matter from them. Bond, in his defence of the small-pox inoculation, maintains, that if proper attention had been paid to the difference between the true and spurious small-pox, it would have saved the lives of thousands. Elsner, in his remarks upon the small-pox inoculation, cautions us to be on our guard not to mistake for the real small-pox, that species of spurious small-pox, which suppurates and can be propagated by inoculation; but which will by no means prevent an attack of the true small-pox. Condamine maintained, that the distinctions of eruptive diseases were far from being ascertained. Tralles made no scruple to say, that he believed a physician might be deceived, and take the chicken-pox for the small-pox. Schultz relates an anecdote of Gaubius, that once an eruptive disease was shown to him, which he declared not to be the small-pox; upon which another person reproached him that he did not know what the small-pox was. The event however proved, that Gaubius was not mistaken; as the patient afterwards caught the real disease.

Cases, therefore, are not wanting to prove, how often errors of this sort have been committed; and it is not to be wondered at in the least, that from such a want of knowledge, the idea should have arisen of persons having the small-pox twice. There are other cases on record, which have led to the same erroneous opinion; and it will perhaps not be amiss to consider some of them here. The first I shall take notice of, are cases of spurious eruptions, produced by inoculations with matter from the true small-pox.

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\* Ring, p. 360.

Dr. Jenner, in his first Treatise, relates an instance of a gentleman, who used to carry about him variolous matter, received on lint or cotton, and put into a phial while in a fluid state. The warmth of his pocket produced putrefaction. Hence, although inflammation, swelling of the axillary glands, fever, and sometimes eruptions, were excited, yet the unfortunate patients were as subject to the small-pox as before; and many, who thought themselves in perfect security, fell victims to that horrible disease.

Dr. Jenner mentions other cases, which occurred to Mr. Earle, surgeon, at Frampton upon Severn. This gentleman took matter from a pustule too far advanced, and inoculated five persons with it. In all, the arms inflamed, with fever, and swelling in the axilla. About the ninth day, an eruption appeared; which, however, dried away sooner than usual. Four of these persons afterwards caught the small-pox in the natural way, one of whom died, three recovered, and the other, being cautioned by Mr. Earle to avoid as much as possible the chance of catching it, escaped the disease through life.

A similar circumstance again occurred to this gentleman. He inoculated three children with matter procured by another person. The arms inflamed properly; fever and pain in the axilla came on; and in ten days eruptions appeared, which disappeared in two days. Being somewhat alarmed for the safety of these patients, from a similarity of their cases to those already mentioned, he inoculated them a second time with matter in its most perfect state; in consequence of which, they all took the infection of the small-pox again, and all had a full burthen.

Similar cases occurred to Bond, in his own practice. He inoculated several children with matter, which, as afterwards appeared, had undergone a decomposition. The children all had a spurious disease. He inoculated them afterwards with proper matter, and they had the true small-pox.

In all these cases, the matter was either taken at too late a period, or had suffered a decomposition; but there are cases related, where matter in its most perfect state was used, and still produced a spurious small-pox. Thus Bond mentions, that at one time he inoculated five persons with fresh matter, and all five got a spurious small-pox. At another time, he saturated a thread with variolous matter, and inoculated several persons with it, all of whom had the true small-pox. Part, however, of the same thread

hread he sent to his brother, who inoculated twelve persons with it, and all had a spurious small-pox.\*

Elsner observes, that some experiments prove that matter taken from the true small-pox, when inserted into the body of some subjects, undergoes such changes as to produce an eruption, which pursues the course of the spurious small-pox; but that, in these cases, such an eruption does not prevent an attack of the true small-pox. He adds the following observation. Whatever is observed in the artificial infection by inoculation, holds true in the natural infection; and the variolous matter, under certain circumstances, may be so much weakened, as to produce a spurious eruption instead of the true small-pox.†

Vogel says, it is certain that, after the inoculation with the true small-pox matter, sometimes a species of spurious small-pox is produced, which is no preventive of the recurrence of the disease. He adds, this proves that the system is not always prepared to produce the true small-pox.‡

Cusson asserts the same, and relates an instance where he saw two children inoculated with the most genuine small-pox matter. The arms inflamed in the usual manner, attended with fever, vomiting, &c. on the seventh day, which was followed by an eruption that did not mature. The gentleman who had performed the inoculation, was perfectly satisfied that the children had undergone the true disease; the more so, as he had taken matter from the arms of these children, and inoculated others with it successfully. The event, however, proved that he was mistaken; for these children afterwards caught the small-pox in the natural way.¶

The last cases I shall consider, which have led to the idea of a second infection of the small-pox, are either those in which, from improper treatment, an imperfect eruption has taken place, or where, by a supervening disease, the small-pox has been for a while suspended. In the first instance, the matter retained will afterwards find its way outwards, sometimes in the form of abscesses, but most frequently in that of an eruption perfectly similar to the  
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\* Vertheidegung der Einpfropfung der Blattern, s. 63.

† Ein Paar Worte Über die Inoculation, s. 47.

‡ Handbuch, &c. Th. 3, s. 10.

¶ Cusson, Recherches sur les irregularités, qui presente quelque fois dans sa marche la petite verole inoculée, et sur la confiance, qui mement des sortes d'inoculations irregulaires.

the real small-pox. In the latter, the small-pox will re-appear, and finish its regular course as soon as the supervening disease has ceased to exert its influence upon the system.

Sidobre relates an instance of a lady of quality, who, after such an imperfect eruption of the small-pox, was not only attacked with fistulous sores, but affected, during the period of eighteen months, with an eruption similar to the small-pox; and a fresh crop of pustules used to break out again, as soon as the former had fallen off.

De Haen mentions, that a boy, three years old, after a severe and ill treated small-pox, continued to be in a weak state of health; that, fortunately, an abscess was formed on his breast, which for some months continued to discharge a quantity of matter. After this, the child began to recover; and in a short space of time, an eruption perfectly similar to the small-pox, again made its appearance.

Hensler corroborates the same; he mentions, that a child had the small-pox in so mild a form, as to require no confinement. He saw the child three weeks after: the pustules were then dried up; the crust, however, did not fall off, but adhered to the skin below, and discharged a sanies which excoriated the parts immediately surrounding it. They itched considerably; and the child was fretful. Hensler ordered the parents to give him from time to time a mild laxative; nevertheless, four days after, the child sickened again, and an eruption appeared, which in some places was confluent. After the eruption dried up, this unfortunate sufferer died of pneumonia.

This author likewise relates, that two boys caught the infection from an elder brother, who laboured under the small-pox. The eldest became feverish on the 3d of January 1762, and continued so till the 10th, when small red spots made their appearance. On the 11th, they were elevated. On the 14th, they were filled with matter; and about the 16th, they began to dry up; the scabs, however, remained for a long while after. Since that time, the boy continued more or less sickly till the beginning of April, when he became feverish again; and after two days an eruption appeared, consisting of large pustules, surrounded by little or no inflammation. They were broad and flat, and filled with a yellow purulent matter. They dried up very slowly. In the youngest the fever took place at the same time with that of the eldest; but he had fewer eruptions. When these dried up, a new crop succeeded; and this succession  
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of fresh crops coming, and going again, continued till April; when the last and most copious eruption took place.

Hufeland relates several instances of the same description. He is of opinion that the antiphlogistic regimen, carried into extremes, too great exposure to cold air, and the abuse of mercurial purgatives, have been the causes which have produced them. He has once seen it occasioned by a strong emetic, given at the beginning of the disease. He likewise mentions several instances, where the measles, the scarlet fever, &c. had suspended the small-pox for several days; and two cases of inoculated small-pox, where the arms properly inflamed, accompanied by fever, and eruptions of small red spots, together with a strong variolous smell; yet a stop was put to the farther progress of the disease by a supervening influenza. These children, eight weeks afterwards, caught the small-pox in the natural way.\*

From a due consideration of the above facts, I must confess that I am rather sceptically inclined, when cases are related, of persons having the small-pox twice. It would be presumptuous in me to deny the possibility of a second infection; several of the most eminent men in the profession have admitted it; and it is with deference to their superior judgment, that I wish to offer mine.

All that I mean to demonstrate is, that the study of this important subject has been shamefully neglected; and that the distinctions between the true and the spurious small-pox are but imperfectly known; witness the pamphlet under consideration. When, therefore, we hear of such cases, we ought to be very cautious, before we pronounce our opinion.

The idea, however, of a second infection of the small-pox, is by no means of modern origin. It seems to have been a favorite topic among the older medical writers. *Amatus* relates, that children, and even adults, who had the small-pox, were infected again at Ancona, in the year 1551. *Forestus* mentions, that at Delft, in the year 1562, and 1563, during a foggy season, not only children and adults, but likewise some old people, who had undergone the small-pox and the measles, were again attacked with similar eruptive diseases. *Stalpart Vander Wiel* saw a child who, three weeks after the small-pox, was infected a second time. *Diemerbroek*, during a violent epidemic

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\* Hufeland *Über die Blattern*, p. 262, 263.

mic, frequently saw a second attack of the small-pox, when the patients were scarcely recovered from the first. Some had, in the course of six months, three different eruptions. A son of Forestus, four years old, had, in the year 1551, the small-pox twice; and afterwards, the measles. Similar instances are said to have occurred in the provinces of Holland, Zealand, and Guelderland, during the epidemic in the summer of 1753. Something more wonderful than all this is related by Forestus. He tells us, that a certain good woman at Boulogne had the small-pox seven times, and died of it in the 118th year of her age.

Ere I conclude, it is incumbent on me to state, that I have made inquiries relative to Mr. Goldson's assertion, that cases of failures have happened in the Isle of Wight. The result of them is, that a child, under the care of a medical practitioner at Newport, had the chicken-pox after the cow-pock; and an enemy to vaccination propagated a report that it was the small-pox. Another case occurred to Mr. Morton, of the Hospital Staff; he himself informed me, that he was under the necessity of taking matter from a pustule too far advanced; that the child inoculated with it had a spurious cow-pock; and that it caught the small-pox before he had an opportunity of inoculating it again. Mr. Goldson pretends to forbear noticing any cases upon mere report; yet he takes notice of them whenever he can; and since his publication, he and his friends have circulated such reports with great industry.

In taking leave of Mr. Goldson, I earnestly advise him to abandon the weapons he has hitherto employed. Idle tales are of little avail; and, even by his friends, can only be looked upon as a last resource.

He who, from a zeal for the discovery, should suffer his eyes to be shut against conviction, and attempt to conceal its failures, would indeed commit an act beneath the dignity of the profession; but he who imposes on the ignorant, under the mask of candour and moderation; who spreads vain alarms, and provokes controversy upon a subject in which he must so sensibly feel his own deficiency, is guilty of a deed far more beneath the dignity of the profession; and far more unbecoming one, who is intrusted with the happiness and welfare of the public.

*Isle of Wight, August 27, 1804.*



*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

AS Mr. Goldson's pamphlet has excited some doubts in the breasts of many, as to the permanence of the vaccine influence, I have sent you the following experiment, which, indeed, has been made by hundreds before; but as nothing will tend more to silence the objection of its enemies, and confirm the expectations of the friends of the cow-pox, than a publication of facts, which prove its security, I should hope that from every quarter vacciination will receive a support which its importance demands, and in which every friend of humanity is interested.

In the year 1801, a gentleman inoculated his own two boys and two of his servants with vacciinous matter, that was sent by Dr. Pearson; on the eighth, tenth, and twelfth days I saw their arms, and was well satisfied that vacciination had taken place. Since then, they have frequently been exposed to variolous contagion, and the parent was convinced it could have no effect on his family, till Mr. Goldson's pamphlet raised his fears. To ease his mind, I inoculated with variolous matter his two boys, one of the servants, and two others who had never been inoculated in any way. The arms of the boys and the servant inflamed from the third to the seventh day, when it gradually subsided, and on the ninth no mark was visible; in the two others, the small-pox pursued its usual course; the eruptions indeed were not numerous, though the eruptive fever was troublesome for two days. There is no occasion for comment, as the fact speaks for itself.

I am, &amp;c.

FREDERIC THACKERAY.

*Cambridge, September 4, 1804.*

P.S. After numberless inquiries in this county, I have never but once met the cow-pox in the cow itself; and it was deemed such a curiosity in the parish, that I was requested to see it; it belonged to the blacksmith. He could assign no reason; and told me, that he had seen no horse with the scratchy heel for some time. As the herd passed by, I observed, that the bull had his foot tied up, in consequence of a sore in the hoof. They who believe that the greasy heel of the horse is instrumental in producing vacciola,

ciola, may think that a similar matter may be secreted in the ulcerated hoof of the bull; and that, in the above instance, the dug of the cow had rested where the diseased foot of the bull had trodden.

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*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

WHILE "diseases, like empires, have their revolutions; old ones dying away and ceasing to be heard of, and new ones arising in their place still more formidable and dangerous, as being less understood," the attempts to account for these changes have produced various conjectures. The dreadful Variola has had its rise, its extensive and desolating spread, but now seems happily verging on its extinction. Arising, according to the Arabian authors, in their country, about the time of the commencement of their Hegira, or in the early part of the seventh century of the Christian æra, and first appearing in Egypt in the reign of Omar, the fanatic, who destroyed the library of Alexandria, its origin has been referred to the camel; and after what has been developed in our country, respecting the casual infection of milkers from the cow, the idea may appear plausible. I have often seen the Arabs lying down at night, to take their sleep by the sides of their camels; but is there any other animal which has been longer under domestication than this creature, 'patient of fatigue'? And if from such source, might we not expect some account of the dreadful disease among the patriarchs; some regulations respecting it in the Mosaic institutes; some notice of it by the earliest medical writers of the Greeks? The vulgar notion that Satan inflicted the small-pox on Job, when he smote him with sore boils from the sole of his foot to his crown, must be quite an absurdity. We do not find that any of his friends who came to see him were infected; and there is no mention of their having particularly received a protection from the tormentor. Perhaps the idea that has been entertained, that the small-pox is no other than degenerated cow-pox, may at last be found to be a correct opinion. I am very naturally led to this surmise by the perusal of the first paper in your last Number. The author, there, (whom I have heard with  
a great

a great deal of pleasure on the subject of cancer, hydatid, &c.) mentions his having inoculated a patient already under a cutaneous affection, three times with vaccine lymph, without producing the local effect; but after she was cured of the first disease, a large number of vesicles appeared in various parts of the body. He says, moreover, "This was not the only instance in which I had reason to believe, that though the local effect of vaccination might be superseded by other causes, yet when those causes ceased, a disposition to the disease, which was formed at the time of insertion, is now brought into action, and shows itself by a general eruption. I very much think that this occurrence is more general than is suspected, and that some of those eruptions which have appeared at a remote period after vaccination, and which the zealots on one side have called small-pox, and those on the other chicken-pox, have been vaccine vesicles. I have already given cases of this arising from a peculiar state of the atmosphere."

Now, if the conjectures be right, that vaccine lymph (vacciolous matter) can under any circumstances produce general eruption; in such departure from its original character we have perhaps one, a first, step of vacciola to its degenerated state of variola. From the earliest pastoral ages, and in various parts of the world, milkers may, in tens of thousands of instances, have received cow-pox; the indisposition produced by it being soon forgotten when it was *once* past. The world at large would, probably, have been ignorant of the existence of such an affection as that of cow-pock in the human subject, had it not been discovered that it protected the system from small-pox. According to the theory of our author, it may have happened in many instances, that the casual inoculation may not have produced its local effect. The milker, already under the influence of some other disease, may have resisted it till such previous disease passed away, when an eruption of vaccine vesicles ought to follow.

If in any constitution, or under any affection of the system, cow-pock could be so modified as to become an eruptive disease, in some disastrous period, we may naturally enough suppose, it may also have become a contagious one; and if so, the most dreadful form of small-pox could not be more horrible than it might immediately become. A case of confluent cow-pox, such pocks as the lancet now produces, were such a thing possible, would as certainly destroy the subject as the act of fleaing him alive.

I presume

I presume the author means by '*after vaccination*,' what I should express by *after insertion of vacciolous matter*, or *after the attempt to vacciolate*; and yet, when he mentions that zealots on one side have called the eruptions after it by one name, and those on the other by another; I am at a loss to comprehend him; because, if it were only *after the attempt*, the advocates of vaccination would have no cause of surprize or disappointment in finding small-pox; the opponents no triumph. And can the author be correct in referring cases to a peculiar state of the atmosphere? Never having noticed any varieties of appearance or effect produced on vacciola by any diversity of diet, from that of the mother's milk alone to that of salt provisions at sea; nor by any change of atmosphere, from the freshness of the vales of Gloucestershire, or the banks of the Seine, to the dampness of the fields of Holland, or the palpable fogs and smoke of London; from the heat of Gibraltar during a Levanter in Autumn to the coolness of a ship; I cannot help thinking that his manner of accounting for peculiarities must be only hypothetical. Perhaps also his conclusion, that the eruptions in question arose from cow-pock matter, may, after all, have no better foundation than hypothesis.

On the origin of small-pox, which I had hoped I was arriving at through the observations of the author, I find, to use a phrase prevalent in this mercantile country, I am still at sea.

The Author thinks that it would be desirable to have a centre of communication in the metropolis, to which every anomalous case should be referred. The Royal Jennerian Society has such centre: its Medical Council is a Committee, composed of fifty professional men, Physicians, Surgeons, and Apothecaries; perhaps, greater talent than it includes is not to be found in any country. From the beginning it has given notice, that communications of *real importance* would meet with ready attention from it; requesting, that they might be drawn up concisely, and *well authenticated*; and when such communications have been made, they have been respectfully answered, to the satisfaction of the writers. Moreover, the post-masters-general have had the liberality to frank the correspondence of the Society, which amounts, weekly, to several pounds.

Your's, respectfully,  
JOHN WALKER.

Salisbury Square, 16, ix, 1804.

To

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

DR. WALKER (No. 67, p. 242, Note) wishes to settle a proper or Classic term for Cow-pock, &c. *Vaccine*, French, is from the Latin: but it is objectionable, with all its derivatives; because, as Dr. W. observes, milk, butter, and cheese are all vaccine; and, indeed, the word more properly belongs to *them* than to the disorder. Milk is by Pliny adjectived with the word, *lac vaccinum*. Ainsworth, for want of higher authority at hand, must be referred to. *Vaccine* alone, means *cowy*; to *vaccinate*, is to cow, or to make of or like a cow; *vaccination*, is the making of or like a cow. *I* short, vaccinate, cannot be.

Dr. Jenner's *variola vaccina* is good, but *two* words; and the term is wanted to be comprized in *one*. What Dr. W. calls the more happy term of Stokes, *vacciola*, cannot be admitted. It has a derivative form and termination; but whence is it derived? Not from *vaccia* or *vaccius*, for there are no such words; nor could there be from *vacca*, a cow: and if there could, *vacciola* would only mean, *a little cow*.

*Variolæ*, literally signifies, *small varieties*, that is, the spots or pits of small pocks with which the skin is varied. But the word is but a translation of *small-pox* by modern physicians. *Vara*, the disorder of *small-pocks* or *measles*, Ainsworth gives, from Littleton, as the authority of Pliny. This word also relates to the skin being *varied* by spots, pocks, or pits.

To find, therefore, one word to express the meaning of two, it may be a compound from two that are shortest. *Vacca-vara* put together, *vaccavara*, might express, *the cow-pox*. The word *vaccavara* would be what the Metrists or Grammarians would call a fourth Epitrite; that is, having the three first syllables long, and the fourth short. Thence might be, *vaccavarous matter*, (accent on the third syllable, on account of the quantity being long, and NOT on the second, like *cadaverous*). Thence also, *vaccavaration*, and *vaccavarate*; accent on the fourth of the former, and on the third of the latter.

*Varus* and *varius*, Latin, being the same, but the first the original, the other derivative, *varation* must mean *variation*; so that *vaccavaration* or *vaccavariation* might either be used from *vaccavara* or *vaccavaria*.

*Obiter,*

*Obiter*, the vulgar and indelicate word *man-midwife*, should be hunted from the fronts of country laboratories. *Accoucher*, Fr. would soon be corrupted to *coucher*. Analogous to *obstetrix*, *fem.* is *obstitor*, in point of sense; and to *institor* it is analogous in form and composition. *Institor* is Horatian, and classical; why not, then, *Obstitor*, *ab obstando, vel obsistendo auxilii adferendi causa*?

*Brainular, scarlatina, caloric, cum multis aliis*, seem barbarisms.

I am, &c.

Sept. 6, 1804.

PHILOLOGUS.

## To the Editors of the Medical and Physical Journal.

GENTLEMEN,

HAVING observed some inconveniencies in the received screw tourniquet, arising from its size and weight, I was led to consider how they might be obviated; and after some attention to the subject, have constructed one, a drawing of which I send you, which will, I hope, have the desired effect. It likewise appears worthy the attention of the army, as it is considerably cheaper than the screw, and much more convenient than the field tourniquet.

Dublin,  
July 11, 1804.

I am, &c.

ANDREW BLAKE

### EXPLANATION OF THE PLATE.

Fig. 1. Is a perspective view of the instrument.

2. Is a geometrical view of the lower part of it, shewing the situation of the pieces FF and C.

ABCD Is the brass frame of the apparatus, of which A and B are the upright pieces, and CD the bottom plate.

EEE Is the pad.

FF Are rollers under which the strap passes.

G Is a similar roller of a large size, having a slit through it of sufficient dimensions to admit the strap.

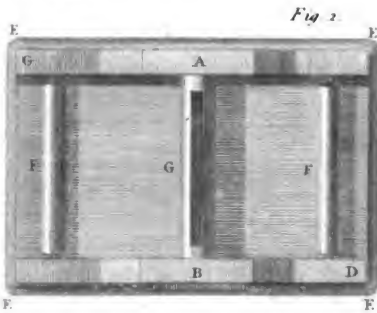
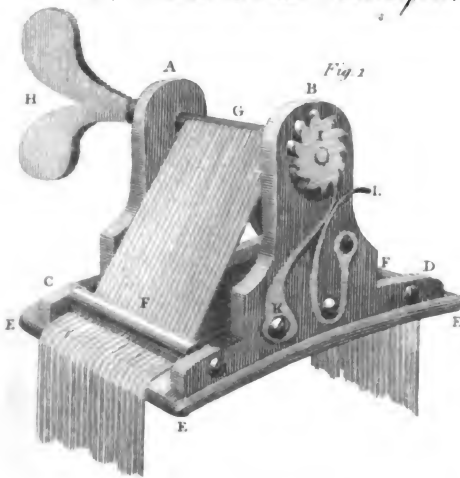
H Is a flier, by which the roller C may be turned, and consequently a portion of the strap wound up on it.

I Is a ratchet wheel fixed to its other end, and which with the springs K and L, prevent the roller from running back; by pressing on the end of the spring L, the wheel I, together with the roller G, and the strap, is released.

The letters of reference to Fig. 2, are affixed respectively to the same parts of the apparatus as in Fig. 1.

CASE

*W. Blake's Screw Tourniquet.*



*J. Patterson's Case.*

p. 198. Vol. 12.







## TO DR. BATTY.

MY DEAR SIR,

I Have sent you a Case for the Medical Journal, the publication of which may possibly tend to encourage doubtful endeavours on similar occasions, rather than abandon the unfortunate to certain death. The only cause to which I can attribute this extraordinary power of resisting a fatal disease, was the established habit of drinking spirituous liquors, the influence of which I have remarked, in other instances, to retard inflammatory terminations. The case may serve also to support the practice of operating for strangulated hernia, even in the most advanced stages, and under disagreeable symptoms.

I am, &amp;c.

*Soho Square, Sept. 3, 1804.*

A. CARLISLE.

ANN SPOONER, a corpulent woman, aged 56 years, for some time a resident in the Westminster Hospital, had an umbilical hernia, protruding about the bigness of half an ostrich's egg. The parietes of the tumour were thin, the contained viscera adhered to the sac, and the aperture in the abdomen was capable of admitting three fingers. She had several times suffered temporary strangulations, which had been relieved by bleeding from the system, and topical bleeding with leeches, &c. On the morning of the 28th of August last, as she drew up her stocking, a sudden protrusion took place, and the hernial tumour became painful and strangulated. The usual methods were employed, but at two o'clock the same day, the tumour burst its coverings, having become mortified, and a large portion of intestine, inflated, and of a livid hue, protruded into the bed. The distention of the intestine prevented its being returned; warm fomentations were applied, and opium with cordials administered. At ten o'clock in the evening I found her with the protruded intestine perfectly dead, and putrescent. A line of separation marked the two living ends, the intermediate mortified portion was found to be a continuous canal, and, as it afterwards proved, upwards of seven feet in length. The mesentery was alive within half an inch of the gut, a line of separation being

(No. 68.)

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visible

visible, and the peritoneal coat both on that and the intestine was vesicated at the mortified border. The patient's strength and spirits were good; she could turn in bed, converse with coolness, and was attentive to ordinary wants and accommodations; her pulse was 115, her skin warm and perspirable, and she had no hiccup. I felt a strong desire to remove the mortified intestine, and to bring the two living ends of that canal together by ligature, over a roll of tough paste; but it was thought too hazardous for the small chance of good to be derived. On Wednesday, the 29th, she continued as before; the intestine became more putrid and more inflated: her pulse was regular, and from 105 to 120; she had occasional hiccup; her strength was by no means sunk. It was still judged imprudent to attempt any operation; she took wine and opium, and had a small alvine evacuation. The pulp of scraped carrot root was applied over the mortified parts, to diminish the putrescent effluvia. Without any remarkable change in the symptoms, in the appearance of the parts, she continued to become gradually weaker until four o'clock on Friday, the 31st of August, when she died.

On opening the body, the peritoneum and all the viscera contained within the abdomen were free from the marks of inflammation; the mortification of the bag which had contained the protruded intestine, was limited to the margin of the hernial aperture, which was about two inches in diameter. The previously adhering parts of the hernia had been all pushed out, and become disunited by the solution of the membranes. The sound border of the mesentery, and the two sound ends of the gut, were ulcerated on their surfaces, and covered with a purulent fluid. The mortified portion of gut proved to be the *intestinum ileum*, the dead part terminating within two inches of its entrance into the *cæcum*; it was measured, (after a partial dissection from the mesentery) and proved to be six feet three inches, although it was not nearly extended into a straight line.

The remarkable points of this case are, the long continuance of life and the limited injury sustained from such extent of disease. The practical inference to be deduced seems in favour of an operation such as that proposed; but it cannot be expected that many cases will occur, wherein the powers of life shall suffer so little, and the disease be so strictly confined.

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

I Have taken the liberty of sending you a statement of the following case of wounded brachial artery, the most essential point in the treatment of which, I learnt from a communication in the Medical Journal, in the month of July, 1802.

I am, &amp;c.

*Plymouth-Dock.*

J. J. SMITH.

CASE.—Edward Kelly, on the 8th of December, 1802, wounded himself with a razor in the arm near the usual place of venæsection, carrying the instrument to such a depth, as partially to divide the brachial artery: The hæmorrhage had almost proved fatal when I first visited him, and I had immediate recourse to the effects of pressure, which in the present languid state of my patient succeeded in arresting the bleeding.

On the eighth day afterward, a slough took place from the wound, and a profuse bleeding succeeded, for which the tourniquet was applied; and as nothing but an operation afforded the hope of saving the life of my patient, I immediately performed one, for the purpose of tying the artery. The arm was much distended with extravasated blood, it was cold and livid, and vesications had already formed near the wound, which had discharged a bloody ichor, and shewed a state approaching to gangrene. I made a longitudinal incision of four inches across the wound inflicted by the razor, which gave me room to proceed in the after steps of the operation, and afforded an opportunity of removing the coagulated blood with which the arm was loaded.

The fascia being laid bare, and then cautiously divided, exposed the ends of the wounded artery in such a manner that the vessel could be readily secured. A ligature was passed around the upper part of the vessel near the orifice, and this being tied in a knot, and the end of it being armed with a needle, the needle was thrust through the artery below the circular ligature, and the thread was tied into the knot previously made upon the vessel.

The same was then effected in the other end of the artery,

artery, which was now an inch below the first. The wound was dressed superficially with the ligatures hanging from it. On the eleventh day the ligatures came away, and the wound was healed in two months, being prevented by a bad constitution from uniting sooner; the motion of the elbow is perfect, and the arm as useful as before, if allowance is made for its being slightly weaker under any great exertion. The security which is obtained by passing the ligature through the artery, nearer the orifice than where the thread is circularly applied, induced me to adopt that practice in the case which I have related, and some such security seems to be necessary, from the cases of hæmorrhage which have happened after the operation for the aneurism, and which have been also known to occur after amputations, which have been performed so near to the body, as to expose the ligature to great impetus of blood from the action of the heart; for I lately witnessed an instance where the arm was amputated near the shoulder joint, and the brachial artery considered as secured; when, upon loosening the tourniquet, a violent bleeding succeeded from the ligature being forced off the extremity of the vessel, but which fortunately happening before the surgeon quitted the room, the life of the patient did not become a sacrifice.

### *To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

**I** Consider it a duty in every practitioner to make as public as possible any circumstance that experience may have thrown in his way that may tend to the alleviation of the calamities of the human race, even in the slightest degree; and under this impression, I am induced to offer you a trifling remedy for the cure of agues, which I have proved to be extremely successful. I am attached to a regiment here; and on my arrival in the latter end of May, found seven or eight of our soldiers labouring under obstinate intermittents: every remedy that is usually prescribed for such cases, had been exhibited without effect. I recommended that each man should take half a grain of tartar antim. the moment he felt the paroxysm approaching, and repeat the dose in about ten minutes or a quarter of hour

hour; it generally produces only nausea, but sometimes vomiting; it lessens immediately the duration of the fit, and its severity, and the patients express a great wish that the same medicine may be again prescribed them: in a week or ten days the whole were completely cured.

His Majesty's 24th regiment came into these barracks about six weeks since, and among the number of their sick were two of agues, of long standing. I proposed to Mr. Featherstone, the surgeon, to allow me to give them the antim. tart. which he very liberally and readily consented to, observing, that he had been giving them the arsenical solution, bark, and every thing he could think of, without effect: These men had no symptoms whatever of ague at the expiration of five days.

In a voyage I once made to India, I had an ample opportunity of proving the good effect of producing sickness in this disease. Our ship was lying in Whampoo River, in China, during the time the Paddy-fields were overflowed, and agues in a short time became so very prevalent among the crews of the different Indiamen, that some of them had not men left sufficiently healthy to perform the regular duty of the ship. The ship of which I was surgeon (the Caledonian) was nearly in that state; my practice at that time was to give emetics previous to the accession of the paroxysm, and I found no difficulty in curing very soon every case that came under my care. But I have every reason to believe that vomiting is not at all necessary to the cure; that nausea is alone sufficient; and I beg to ask, may not the good effect produced by arsenic in this disease arise purely from the sickness it causes, and not from any tonic power it possesses?

I am, &c.

B. G. SNOW.

Woodbridge Barracks, Suffolk,  
September 9, 1804.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

YOUR Correspondent, Dr. Blegborough, discovers a *cacoëthes scribendi*, that almost necessarily betrays him into a *cacoëthes errandi*. That multifarious writer conceives his notions to be so many *fiats*, to which implicit acquiescence should be given. His speculative wanderings, however,

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ever,

ever, are not scientific truths; nor do they tend to illustrate the practical difficulties he would wish to explain.

The Doctor's view of temperature, in your last Number, presents a singular example of inconsistent inquiry. He imagines heat to pervade and fill the animal body, as water may occupy a sponge; and as that fluid may be pressed from the latter, so the matter of heat, the Doctor thinks, may be abstracted from the former. Were this the case, the most refrigerant process that could be instituted would be brisk friction; and, consequently, instead of cold water being applied as an appropriate remedy to an inflamed part, mechanical rubbing would more readily squeeze out the morbid excess of heat.

The Doctor speaks at one time of heat being a stimulant, sufficiently powerful to excite the worst forms of typhus fever; and at another affirms, that it so expands the vessels, as to render them incapable of contractile exertion. But, notwithstanding this vascular inaction from excessive heat, the Doctor acknowledges that the various phenomena of violent fever still obtain.

The Doctor also, with licentious speculation, aspires to inform the public, and particularly that distinguished medical philosopher, Dr. Currie, that the exacerbation and remission of febrile heat are governed by the different degrees of atmospheric temperature, at the periods when these changes respectively occur. The Doctor then as familiarly speaks of removing a pint measure of material heat as he would of an equal quantity of blood, and deduces important mechanical relief to the system, and particularly to the brain, from the abstraction of that expansive fluid.

This very visionary reasoning has been induced by a total forgetfulness that the subject of inquiry related to animal life, endowed with the power of generating salutary heat, agreeably to the laws of repulsive motion, and of transferring to surrounding media that which may be redundant; that if the atmospheric temperature be freely applied, no morbid surplus of heat is likely to occur; and that when it does present, it in no shape mechanically and stationarily amasses, but that it directly results from the morbid action of vessels generating the exuberant portion of that motive principle.

The mere abstraction of the Doctor's morbid accumulation of heat, can have but little influence in curatively reducing either the excessive temperature of typhus fever, or that of inflammatory affection; the abstraction must be  
uninterruptedly

uninterruptedly continued, until the diseased action which furnishes it be superseded by that which is healthful, and which is recognised by the sense of salutary heat.

Instead of vital heat being an extraneous something, mechanically running through the animal system, and either generally or partially amassing and proceeding to febrile or inflammatory excess, it is the very principle of living motion, actuating, regulating, and equipoising the various functions of the animal economy; its offensive excess is obviated by the evaporating or abstracting agency of cuticular perspiration, and that of the various other secretions.

When obstacles occur to these refrigerating outlets, redundant heat will arise, which may variously disorder the motive conditions of healthful excitability; sympathies may be also engendered, which may diversify the external character of the affection. Under these circumstances, the indication of immoderate heat afforded as well by the natural sense of feeling as by thermometrical test, will direct to the suitable reduction of temperature. The mode of applying this relief may be adapted to the temperamental sensibility of patients; but it will in general be found, that Dr. Currie's plan of suddenly dashing cold water over the surface of the skin, will at once effectually dissolve the morbidly associated actions which may have been formed, and promptly transfer the redundant heat. The mode by sponging may also ultimately avail; but it is much less likely to produce the salutary change in the inordinately generative action of heat, and its diseased sympathies, than the more impressive shock induced by its instantaneous application.

Dr. B. is on philosophic ground, in investigating the influence of animal temperature on diseases; but his inquiry must be neither gratuitously nor incongruously conducted. The Doctor must not advance as tenable, doctrine, which, to unprejudiced reason, appears indefensible, without the aid of facts to justify its recommendation; nor must he, at one time, contend that morbid excess of temperature ought to be reduced by *cold water*, and that, at another, *steaming heat* or the *vapour bath*, is best adapted to produce that effect!

Less disposition to assert, and a more earnest endeavour to correct and mature, crude and hasty views of the motive laws of the animal economy, may qualify the Doctor for intricate researches in Medical Philosophy, and afford him a better title than he has yet discovered, for offering

hints of practical improvement in the theory and management of diseases of temperature, to so able an investigator as the much and deservedly respected *Author of Reports* on that subject.

CANDIDUS.

*St. James's Street, Sept. 12, 1804.*

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

ON reading in the Medical and Physical Journal for April, the ingenious method, proposed by Mr. Hardman, to open an abscess by means of an exhausted cupping-glass, it naturally occurred to me, that the same mode could be most effectually employed in various other instances, where it may be requisite to extract morbid or extraneous fluids, especially when no time should be lost to afford relief. —

Those who are conversant in Surgery, and its daily practice, may, possibly, suggest a great variety of other cases, in which this mode of operating can be advantageously followed; there is, however, one, of the utmost importance, in which it may afford an immediate cure, and completely prevent the most afflicting and direful malady, to which a living body is liable, that is, *Hydrophobia*.

It can only be ascertained by fair and repeated experiments, whether we can depend upon this as a secure preventive; and it certainly should not be condemned or refused until we have had the most undeniable proofs of its inefficacy.

The moment an accident of this kind has happened is, evidently, the only period to apply the glasses, with any prospect of success. A more powerful degree of suction can easily be obtained by the use of a glass receiver, furnished with a stop cock, and exhausted by the air-pump. The mouth of this vessel should not be very narrow, as it may be proper and convenient to cover all the tooth-marks at once, if possible, or in as rapid succession as may be. The blood, if it flow, should be instantly wiped off with a sponge; and it would be prudent to repeat the operation at least once more.

Besides canine-madness, this method should be tried in  
all



all similar cases; and the very same means pursued, whether the wound has been inflicted by a rabid or poisonous animal, or by a poisoned instrument.

I may, perhaps, have stumbled upon what has already been publicly noticed and recommended by others; if so, I can only assure you, this communication arises from the best intention, and, should it be found destitute of original merit, I hope you will reject it.

I am, &c.

*Long Acre, Sept. 13, 1804.*

J. HUME.

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SHORT STATEMENT OF THE RESULT OF THE PRACTICE IN  
THE HOSPITAL FOR PRISONERS OF WAR AT NORMAN  
CROSS. *Communicated by* LEONARD GILLESPIE, *appointed Physician to the Fleet in the Mediterranean Sea.*

THE depôt for prisoners of war, established last war on the hill of Norman Cross, is situated on the north road, seventy-six miles north of London, and overlooks on the north-east the lake called Whittlesea Mere, distant about three miles, together with the extensive plains of fen-land, which extend for upwards of thirty miles in a north-east direction from Norman Cross to the borders of the gulph on this coast, called Boston Deep. The buildings are of wood, and have been occupied by French and Dutch prisoners of war since the commencement of the present war in numbers varying from 1600 to 1000, who have enjoyed a very tolerable state of health since their confinement at this place, as will appear by the enclosed abstract of the numbers received into the hospital. The air of Norman Cross, notwithstanding the vicinity to the fen-lands, is salubrious; the soil is dry and calcareous; the water is drawn from wells in depth from thirty to sixty feet, and is a little hard, being impregnated with a small quantity of earthy salt, probably gypsum, preventing its lathering with soap. The patients in the hospital are, to the honor of the Commissioners for Sick and Wounded Seamen, under whose protection they are placed by Government, treated precisely as our own seamen are in naval hospitals, and of course have every proper attention paid to their comfort, and to the re-establishment of their health. The diseases most prevalent amongst the prisoners of war at Norman Cross, during the winter, were catarrhal complaints, sometimes degenerating into peripneumonia and carditis, fatal instances

instances of which occurred, indicated by great anxiety, oppressive pain at the sternum, irregular pulse, and dry cough; and in which cases, dissection proved, that the heart, as well as the lungs, had been really inflamed. Several of these catarrhal complaints also include phthisis pulmonalis.

Rheumatic complaints were also very common, and numbers of the patients were afflicted with rheumatic fever of a remittent type, protracted beyond the period of a lunation.

Many cases of troublesome chilblains occurred to the prisoners who had not sufficient cloathing in the prison; and the itch affected about one hundred of them, who in the spring were without much difficulty cured in the usual manner. During the spring and summer months some hundreds of prisoners having been sent from prison ships in the river Medway, many of them were affected with tertian fevers; in a few cases, of the regular double tertian type; remittent and intermittent fevers also attacked a few of those prisoners who had remained at Norman Cross during the preceding winter.

A few instances of putrid fever occurred in some patients, which, from the symptoms and protracted length of the disease, might be justly termed typhus; whilst in two or three cases the violence of the symptoms, the ardent heat of skin, intense thirst, parched soul tongue, icterical suffusion of the skin and of the eye on or before the sixth day, atrabiliary or dark alvine evacuations, and rapid progress of the diseases, seemed to entitle it to the appellation of febris ardens of Hippocrates and his disciples, or to that of the yellow fever (vulgarly so called) of the West Indies.

In no one of these cases was the disease propagated by contagion; the common precautions to prevent it were practised. In those cases of ardent fever it was found highly advantageous to shave the head, to sponge the whole of the body frequently in the day with vinegar, to administer saline draughts in the act of effervescence, to give lemonade for drink, and to administer frequent cooling acidulated injections, avoiding the bringing on of a diarrhoea, or when present, moderating it by the infusion of Columbo root aided by rice water, sago, arrow root, gruel, &c. In the low stage of the disease large blisters successively applied, and the discharge from which was kept up for some time, were principally depended on, aided by wine, camphor, and bark. In intermittent fevers the use  
of

of ligatures on the extremities were frequently attended with the effect of checking the violence of the paroxysm, when applied before the cold fit came on.

The scurvy, in its incipient stage, affected many of the prisoners who had been sent from Chatham, and who had lately come from the West India Islands; the usual symptoms of this disease here made their appearance, as, laxity of and bloody gums, looseness of the teeth, fætid breath, discoloration, a degree of rigidity and contraction in the flexor and adductor muscles of the lower extremities. These patients generally soon recovered by the use of vegetables aided by the fresh citric acid. It is proper to observe, that the patients affected with itch, a slight degree of scurvy, trifling ulcers (which were few in number and of a benign character, evincing the salubrity of the air of the depot) were, together with other patients affected with slight complaints, treated in the prison, which is airy and surrounded by tolerably spacious airing grounds, and consequently were not admitted into the hospital.

*Copy of Abstracts of Quarterly Books containing the Number of Patients received, discharged, cured, dead, &c. in the Hospital for Prisoners of War, at Norman Cross, near Stilton in Huntingdonshire.*

|       |                 |                                                     |           |           |
|-------|-----------------|-----------------------------------------------------|-----------|-----------|
| 1803. | Last quarter.   | Received in the quarter ending the 31st of December | - - - - - | 123       |
|       |                 | Discharged cured in ditto                           | - - - - - | 81        |
|       |                 | Dead in ditto                                       | - - - - - | 3         |
|       |                 | Remaining in the hospital, Dec. 31st.               |           | 41        |
|       |                 |                                                     |           | — 125     |
| 1804. | First quarter.  | Remaining Dec. 31st.                                | -         | 41        |
|       |                 | Received in the quarter                             | - - - - - | 213 — 254 |
|       |                 | Discharged cured in ditto                           | - - - - - | 179       |
|       |                 | Dead in ditto                                       | - - - - - | 3         |
|       |                 | Remaining on the 31st of March                      | -         | 72        |
|       |                 |                                                     |           | — 254     |
| 1804. | Second quarter. | Remaining                                           | - - -     | 72        |
|       |                 | Received in the quarter                             | - - - - - | 105 — 177 |
|       |                 | Escaped in ditto                                    | - - - - - | 2         |
|       |                 | Dead in ditto                                       | - - - - - | 4         |
|       |                 | Discharged cured in ditto                           | - - - - - | 111       |
|       |                 | Remaining June the 30th                             | - - - - - | 60        |
|       |                 |                                                     |           | — 177     |

1804. Third

348 *Letter from Paris, on Mr. Goldson's Pamphlet.*

|       |                                     |           |    |       |
|-------|-------------------------------------|-----------|----|-------|
| 1804. | Third quarter, up to Aug. 31.       | Remaining | 60 |       |
|       | Received up to ditto - - - - -      |           | 57 | — 117 |
|       | Discharged cured up to ditto - - -  |           | 63 |       |
|       | Dead up to ditto - - - - -          |           | 3  |       |
|       | Remaining on the 31st of August - - |           | 51 |       |
|       |                                     |           |    | — 117 |

*Diseases, of which the Patients died.*

|       |                |                                   |       |    |
|-------|----------------|-----------------------------------|-------|----|
| 1803. | Last quarter.  | Phthisis Pulmonalis               | - - - | 3  |
| 1804. | First quarter. | Peripneumonia                     | - - - | 1  |
|       |                | Ditto with Carditis               | - - - | 2  |
|       | Second ditto.  | Ardent fever                      | - - - | 2  |
|       |                | Typhus fever                      | - - - | 1  |
|       |                | Phthisis Pulmonalis               | - - - | 1  |
|       | Third ditto.   | Ulceration of the urinary bladder |       | 1  |
|       |                | Phthisis Pulmonalis               | - - - | 1  |
|       |                | Typhus                            | - - - | 1  |
|       |                |                                   |       | —  |
|       |                | Total                             | -     | 13 |

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

I Request you to communicate, for the information of your every-where spread Readers, the reception which Paris, as well as Edinburgh and Dublin, has given to the pamphlet of William Goldson. Your insertion of the following official paper will also tend to show the pains which have been taken to give it gratuitous diffusion.

Salisbury Square; 20, ix, 1804.

JOHN WALKER.

Ministère de l'Intérieur.

Paris, le 8 Messidor, An. 12.

LE SECRETAIRE DU COMITÉ CENTRAL DE VACCINE, à  
MONS. NOWELL, Physician, No. 100, Great St. Martin's Lane, Charing Cross, London.

Monsieur,

La Société vient de recevoir par les soins de M. Blagden un petit ouvrage, intitulé, "Cases of Small-pox subsequent to Vaccination, with Facts and Observations:  
read

read before the Medical Society at Portsmouth, March 29, 1804. Addressed to the Directors of the Vaccine Institution. By William Goldson, Member of the Royal College of Surgeons, in London. Portsea, 1804.

Plusieurs faites contenus dans cette brochure méritent toute notre attention, & nous n'osons y ajouter foi qu'après avoir appris de vous quelle peut être la cause des evenemens qui y sont rapportés. Nous ignorons quelle confiance on doit avoir dans les assertions de M. Goldson; et jusqu'à ce que vous nous ayez instruit des moindres détails, il est bon que nous nous tenions sur la défensive. Ces faits, s'ils existent, nous paraissent tellement extraordinaire, si peu conformes à tous ceux observés depuis longtemps dans tout le monde savant, que nous n'hésitons pas à croire qu'il y a eu quelque erreur commise dans la vaccination, ou qu'on a pu se tromper sur l'inoculation de la petite vérole.

Quoiqu'il en soit, Monsieur, la nouvelle Société ajoute beaucoup d'importance à recevoir de vous tous les détails qui pourront l'éclairer, et elle ne doute pas que la plus grande impartialité ne vous guide dans la réponse que je suis chargé de vous supplier de vouloir bien lui faire.

Vous ne pouvez douter, Monsieur, de l'empressement avec lequel je saisis cette occasion de vous assurer de ma haute considération.

TURRON.

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*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

**A** Friend of mine having paid considerable attention to the physiology of leeches, and by his method of managing them has been enabled to preserve them fit for use for several years; has permitted me to communicate the result of his experience, through the medium of your useful and respectable Journal.

It appears that river water, though impregnated with foreign substances, is much preferable to spring water, particularly if it be suffered to stand in a cistern for two or three days previously to being used. It is necessary to give the leeches fresh water every day; and in cold weather, it should be in a tepid state.

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The vessel containing them must be kept in a place where the temperature will not be reduced below 60° of Fahrenheit.

When you put them into fresh water, you will sometimes observe a greenish excrement come from them, in the form of a thread, which will discolour the water. Whenever this is perceived, it is better to renew the water immediately. You will often see their bodies encircled in various places with pieces of tough, light coloured mucus; this should be removed by gently rubbing them with a soft rag, as they are frequently unable to get rid of it themselves; and, unless this is done, they become sickly, and injure the rest. This seems the most formidable complaint to which they are subject; and on its removal you will be convinced, by the liveliness of their motions, that you have removed an unpleasant and an unhealthy load from them.

If these observations be attended to, and the leeches not too much crowded in the vessel which contains them, there will soon be no reason to complain of their scarcity.

I am, &c.

Nottingham, Sept. 6, 1804.

JOHN WHITLAM.

*On the Preparation of nourishing Broths from fresh and dry Bones, by Mr. HERMBSTAEDT.*

**F**LESH, without fat and bones, consists of jelly, a particular odorous substance, a fibrous substance, and much water; all which constituents are met with in the flesh of every animal, and nearly of the same quality; but with respect to their quantity, the different sorts of flesh greatly differ from each other. I have made my experiments on beef, veal, mutton, and pork; the results of which are, that the constituents were found in these sorts of flesh, on an average, to be in one pound (16 ounces Germ. civil weight)

|                          |                   |                           |
|--------------------------|-------------------|---------------------------|
| 1. Dry, nourishing jelly | 2                 | to 2 $\frac{1}{2}$ ounces |
| 2. Fat - - - - -         | $\frac{2}{15}$    | $\frac{1}{4}$             |
| 3. Fibrous substance -   | 2                 | 2 $\frac{1}{2}$           |
| 4. Watery particles -    | 11 $\frac{1}{15}$ | 10 $\frac{1}{4}$          |
|                          | <hr/> 16          | <hr/> 16.                 |

Of

Of these constituents, the jelly which is extracted by water may be considered as the nutritive matter, the fibrous substance merely satiating the stomach; for which purpose, other substances may be employed. Bones, in their fresh state, freed from flesh, fat, and membranes, contain in one pound the following constituents.

|                                            |   |    |        |
|--------------------------------------------|---|----|--------|
| 1. Dry nourishing jelly and odorous matter | 4 | to | 4½ oz. |
| 2. Fat - - - - -                           | 2 |    | 2½     |
| 3. Bony substance - - - - -                | 8 |    | 7½     |
| 4. Watery particles - - - - -              | 2 |    | 2½     |

The jelly of bones perfectly resembles that of flesh, and the bony substance is very analogous to the fibrous substance of flesh; consequently, the bones seem merely to be an indurated flesh. Both parts differ from other animal substances by containing a peculiar odorous matter, from which the agreeable and refreshing smell of broth and roasted meat arises, and of which horn, the tendinous parts, the membranes and intestines are entirely deprived; and the jelly which may be procured from these substances is not so agreeable as that obtained from flesh and bones, but rather resembles glue. The jelly, the fat, and the odorous matter are separated by boiling flesh and bones in water, whereas the fibrous and bony matters remain undissolved in a tasteless state.

The decoctions of flesh and bones being cooled, the fat is separated on their surface, in a coagulable state, while the broth runs into a trembling jelly, capable of being cut into pieces. On evaporating this jelly to perfect dryness, it may be preserved many years, without danger of corruption; it readily dissolves in hot water, forming a liquid, very agreeable, and nourishing broth.

According to the above statement, one pound of fresh bones contains, on an average, double the quantity of dry nourishing jelly as one pound of fresh flesh without bones. But as flesh sold in the market contains at least 25lb. of bones in every 100 weight, which by the common boiling yields but a small portion of their virtues, the proportion of constituents in 1lb. of flesh with bones may be stated in the following manner.

|                      |    |        |
|----------------------|----|--------|
| 1. Bones - - - - -   | 4  | ounces |
| 2. Jelly - - - - -   | 1½ |        |
| 3. Fat - - - - -     | ¾  |        |
| 4. Fibrous substance | 1½ |        |
| 5. Watery particles  | 8½ |        |

The proportion of jelly, therefore, extracted from flesh with bones, to that from bones only, is  $= 3:8$  or  $= 1:2\frac{2}{3}$ , consequently, each pound of bones is  $2\frac{2}{3}$  times more value than one pound of flesh, if compared with respect to their nutritive virtues. Bones that have been boiled with the flesh in the common way, retain the greatest part of their jelly, and yield, according to my method, at least three-fourths as much jelly and fat as fresh bones which have not been boiled. The method of separating the nutritive particles from bones is not expensive; and although the price of fresh bones be equal to that of flesh, would, notwithstanding, be advantageous. But when the bones of boiled or roasted meat are employed, which may be purchased at a very low price, the fat alone that is obtained by my method of boiling, will defray the expence of fuel, &c. and the jelly itself scarcely cost any thing. Those bones that are usually thrown away might be advantageously employed in making food for the poor, as well as for hospitals; and they will likewise afford, with the necessary additions, wholesome and agreeable soups for families; by which means the expences attending the purchase of meat will be considerably reduced. Large public institutions for supporting poor and helpless people may also derive great advantages from this manner of preparing nourishing jellies. Now, supposing that one institution consumes twenty oxen per month, this will, in the course of a year, amount to two hundred and forty; and supposing that each ox weighs 500lb. the whole mass of beef consumed in this period of time will average 120,000 lb. which, at a low calculation, contains 25lb. of bones in every cwt. or 30,000 lb. According to my experiments, 1lb. of bones, in their fresh state, contains 4 ounces of dry jelly and 1 ounce of fat; consequently, those 30,000 lb. of bones contain 120,000 oz. or 7,500 lb. of dry jelly, and 30,000 oz. or 1,875 lb. of fat. But as 1lb. of such jelly, considered as nutritive matter, is equal to 8lb. of flesh, those 7,500 lb. of dry jelly from bones are of the same value as 60,000 lb. of flesh. Or, if we take the price of 1 lb. of beef to be equal to 2 groshen or about 3d.  $\frac{1}{2}$ , the value will be 5,000 rixdollars. And if we bring the fat obtained from the bones into computation, at 6d. each lb. those 1,875 lb. of fat will be worth 312 rixdollars; consequently, such an institution might yearly gain the sum of 5,312  $\frac{1}{2}$  rixdollars; a diminution of expence which certainly deserves attention. The greatest advantage may arise from the introduction of such a jelly



to armies and field hospitals, particularly if it were prepared in great quantities, as it might be readily transported without any fear of corruption. Soldiers would always have a cheap, nourishing, and wholesome diet. Besieged places could in this manner more easily guard against the want of meat; and to the sick and wounded, it would afford a nutritive food. The jelly may be rendered more fit for preservation by salt, spices, onions, &c. and I again maintain, that there is not the least difference between the jelly of bones and that prepared from flesh.

Other advantages which the preparation of this jelly seems to promise, I shall more amply detail in a particular work which I intend to publish on this subject.

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ANALYSIS OF THE BROTH FROM BONES, BY M. RICHARD  
AND SON.

**T**HE experiments made on the analysis of the broth from bones were published by order of the Prefect of the Department des Bouches du Rhone, and are as follow.

Exp. 1. After we had procured five pounds four ounces of bones from oxen, and freed them from the cartilagineous and tendinous parts, we reduced them to a paste by strong trituration, which was boiled for about five hours with double its weight of water in an iron pot. The broth being filtrated and cooled, two pounds four ounces of jelly were obtained. The residuum was found to be four pounds, which being again subjected to decoction with double its quantity of water, yielded two pounds one ounce of jelly. The remaining bones weighed about four pounds; they were submitted to a new decoction, and the jelly thus obtained, weighed nine ounces. Lastly, we caused the pieces of bones that remained on the filtrum, to undergo another decoction, after they had been previously triturated, and we obtained eleven ounces more of jelly. Thus five pounds of bones produced near the same quantity of jelly.

Exp. 2. Having been thus assured that the bony substance furnished a quantity of jelly sufficient for being introduced with advantage into hospitals, we thought it proper to undertake a chemical examination of this substance.

(No. 68.)

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stance,

stance. With this view, a portion of jelly was dissolved in a sufficient quantity of water on a sand bath, whereby broth of a greyish colour, of rather an unpleasant smell, but not disagreeable taste, was obtained. Added to the *syrupus violarum*, it had no action on the blue colour; and mixed with alkali, no effervescence was perceived.

EXP. 3. Being thus convinced that no acid was contained in the above broth, it remained to examine the nature of the different salts that might be present in it, which we could not doubt were the elements of the osseous texture, consisting of a saline calcareous substance and a gelatinous matter. The reagency which we employed for this purpose, were the acidulous oxalat of pot-ash dissolved in water, which being added to a portion of the broth, occasioned no precipitation: nitrate of mercury troubled the liquor but little, which however made us presume that it contained some muriatic salts. Ammonia did not produce any change, neither did a solution of fixed alkali. Concentrated acid had likewise no action on the broth, except that it became a little turbid by the addition of concentrated sulphuric acid. These experiments led us to conclude, that if there exists a saline substance, it cannot be phosphat of lime, which would have been discovered by the acidulous oxalat of pot-ash. Turbidity occasioned by the addition of sulphuric acid and of nitrate of mercury caused us, however, to suspect the presence of muriatic salts; to examine which, we undertook

EXP. 4. Part of the jelly submitted to distillation in a glass retort, to which was annexed a recipient, yielded an insipid inodorous phlegm; but the fire being increased, the matter puffed up and blackened; it exhaled a fetid smell. The interior of the retort was filled with thick white fumes, and a second phlegm, which was mostly alkaline, passed into the retort; soon after an oily matter, of an empyreumatic smell, appeared on the surface, and a slight saline crust was formed on the sides of the recipient, which being detached, proved to be carbonat of ammonia. The residuum remaining in the retort was a coaly matter, which being incinerated, appeared to be muriat of soda and phosphat of soda. The following proceeding confirmed our opinion. This saline matter was dissolved, evaporated, and crystallized; and the greatest part was muriat of soda, which appeared from its decrepitation, easy solubility, and the known taste of common salt. With respect  
to

to the phosphat of soda, it perfectly dissolved in water; it changed the colour of *syrupus violarum* into green; and exposed to the fire, it puffed up and melted.

After these experiments, which were made with the most scrupulous attention, we think that the presence of phosphat of lime in the broth from bones is not at all to be apprehended. However, to leave nothing imperfect with regard to this analysis, we thought it proper to repeat an experiment of Professor Dispan, in order to be finally convinced, whether phosphat of lime be not combined with the broth from bones; but after the jelly had been dried and incinerated, we could not trace the least phosphat of lime. A curious circumstance to be observed is, that broth made from flesh contains phosphat of lime, which has been proved by Professor Dispan; and as this broth is universally found wholesome and nourishing, why should not the broth from bones have the same quality, even if some traces of phosphat of lime were discovered in it?

From this analysis we may justly conclude,

1. That bones contain a great quantity of jelly, sufficient for affording a wholesome and cheap food, and also a small quantity of muriat and of phosphat of soda.
2. That we need not apprehend the presence of phosphat of lime in the broth furnished by bones, because this saline substance cannot be separated from the bones by the common proceeding of decoction.
3. That five pounds of bones have only yielded the same quantity of jelly, though M. Cadet-de-Veaux, in his memoir on the alimentary economy, states, that he has extracted four ounces of jelly from one ounce of bones; which difference, however, much depends on the age of the animals from which the bones are taken, as young bones always yield a greater portion of jelly than old ones.
4. That even if we obtain only the same weight of jelly, great advantages might accrue to all ranks of society by this method of making broth from bones.
5. That all governments ought to encourage this discovery, by ordering such broths to be introduced into hospitals, and similar institutions.

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

**I**N the last Number of your Journal are some Remarks on the Cow-pock by Dr. Walker; who tells us, that when the variolous pock has acquired its full dimensions, it breaks into a number of distinct vesicles, while the cow-pock, or rather the congeries of vesicles of which it consists, remains united.

This is an inaccurate description of the variolous pustule, excited by inoculation. It does not break into a number of pustules. On the contrary, there is an eruption of secondary pustules near to the primary pustule, with which they become confluent; so that, instead of dividing into many parts, variolous pustules have a tendency to unite.

It is well known, that matter is most active when taken from a vaccine vesicle at an early period; it is also well known, that it will sometimes succeed when diluted, and even when mixed with blood; but I am sorry to find the necessary precautions in taking matter are so much neglected, that one practitioner has seen such matter used a thousand times.

Dr. Walker tells us, that pus taken from under a scab, and used in inoculation, will not produce any effect. Others tell us another tale; and if such practices are encouraged, we shall often hear of the same disastrous consequences as have already happened from the abuse of vaccination.

Dr. Walker tells us, that if the scab be removed, the pus wiped away, and the part underneath broken down with a lancet, it yields, in a smaller quantity, a fluid equally active with that which is taken from an uninterrupted pustule. If such hazardous experiments are ever made, the less that is said about them the better.

Dr. Walker asks, why we should say, *vaccine*, in imitation of the French? The fact is, the French say *vaccine* in imitation of the English. He says, we lay aside the term Cow-pock. This is a mistake; there is no term in more common use.

He considers *vacciola*, the word proposed by Dr. Stokes, the most happy word to be adopted as a *root*; from which all the terms used in the practice may be derived with more advantage. This *root* is *radically* improper. If admitted at all as a Latin word, it is a diminutive from *vacca*,

ca, and of the same import as vaccula, a little cow. Vaccine means something of or belonging to a cow; and is perfectly expressive of the object under consideration. Hence we say, vaccine matter, vaccine virus, the vaccine fluid; vaccine inoculation, the vaccine disease, vaccination; and to vaccinate.

Dr. Walker says, he is sorry to see me follow the French nomenclature in my Treatise. I have the pleasure to inform him, that I have not followed it. The French nomenclature consists of four words; two of them I used before the French used them; the other two I have never used at all.

It is true, I copied the French nomenclature; but at the same time declared it to be, "for the sake of those into whose hands any Treatise on this important branch of medical science, written in the French language, may happen to fall." Dr. Walker has also copied it; but this is by no means an approbation or disapprobation of the terms therein contained.

I thank your Correspondent, S. M. for his information concerning the London Dispensatory; and I think it a duty, on this occasion, to express a wish, that whenever any alterations are made in this work, public notice were given of the circumstance, in order to promote that uniformity in the composition of the medicines therein directed, which is so much to be desired.

Your Correspondent denies the merit of novelty to my observations on diarrhœa, but allows them the much greater merit of being practical and useful. Were every thing but what is novel excluded from your Journal, or any other medical publication whatever, the remainder would lie in a very small compass.

Your Correspondent wishes to know the cause of the great mortality which has lately prevailed among leeches. This, I apprehend, is not to be ascribed to any peculiarity in Thames water, but to the great heat of the summer. Leeches are animals to which the extremes of heat and cold are equally destructive. I have frequently known a similar mortality among them, when they were kept in the New River water.

The wholesale dealers in leeches keep them in spring water during the severity of the winter, because it is then warmer than river water. Possibly, it may be better than river water during the summer, because it is then colder; and particularly if the putrefaction in river water have  
any

any share in producing the mortality in question. It is obvious, that a cool situation should be preferred in summer, and a warm one in winter.

The observations in your last Number, relative to eruptions after vaccination, by Dr. Adams, are interesting; as every thing must be that comes from his pen. Having seen him, when he was in London, I told him that it was the general opinion of those whom I had heard speak on the subject, that the eruptive cases he met with at Madeira were not cases of the cow-pock. I asked him whether he was still of opinion that they were cases of this kind, and he answered in the affirmative.

By a reference to those cases, which were published in the Medical and Physical Journal, for April, 1803, it appears, in some of them the eruption took place without any local sign of infection on the arm. This is so different from what has been observed in other parts of the world in general, that we must be excused for harbouring a certain degree of scepticism on the subject, till the point is cleared up, by the future experiments and observations of other practitioners, with other cow-pock matter.

This scepticism is rather increased than diminished by Dr. Adams's late communication, in which we are informed, that the same event took place in a patient who had the itch. No local effect was produced; and Dr. Adams, in this as well as the other cases, might well be astonished at the appearance of a great number of vesicles on other parts of the body; but it by no means follows, that they were of the vaccine kind.

While we are sceptical with regard to the nature of the eruptions which have occurred in the practice of Dr. Adams, we cannot be hurt at his being sceptical with regard to the eruptions which have occurred in our practice. He suspects, that some of the eruptions which appear at a remote period after vaccination, which the zealots on one side call the small-pox, and those on the other the chicken-pox, are nothing but vaccine vesicles.

I have seen many such cases, and have never seen one of them bear a resemblance to a vaccine vesicle. I have known matter taken from such eruptions produce the chicken-pox. Dr. Willan has also seen several of these cases, and pronounced them to be the chicken-pox; and Dr. Adams will not call Dr. Willan a zealot.

I know no reason to suppose, that eruptions which appear at a remote period are owing to vaccine inoculation;  
nor

nor do I know of any new species of vesicular eruption which has lately appeared. Instead, therefore, of our supposed cases of chicken-pox being the cow-pock, I am inclined to think, Dr. Adams's supposed cases of cow-pox were the chicken-pox.

Dr. Adams wishes we were all more attentive to mark phenomena, than hastily to get through difficulties. In this sentiment every friend of science must coincide. But when he tells us, that we ought as much as possible to encourage the objections of the captious, it may be necessary to observe, that after the rigorous ordeal which vaccination has now undergone, such objections can only serve to keep the mind of the public in a continual state of alarm.

He allows, that the objections hitherto started are too light to be taken into account, when compared with the contrary evidence. This being the case, nothing should be encouraged that tends to retard the progress of vaccination, and to prevent the present age from enjoying the full advantage of the practice.

Too much encouragement is given to such objections; too much encouragement is given to unauthenticated reports; and too many periodical publications are ready to receive and circulate any lie that is fabricated against vaccination. One of these lately refused admission to a letter from Dr. Marshall, complaining of the iliberality of an anonymous attack on the practice and himself; and pledging himself to refute the charges, if the author of the attack would publish his name, and specify the names of the parties in whom the pretended failures had occurred. Admission was also refused to a respectful representation of the impropriety of admitting anonymous attacks of this kind, and anonymous reports on so important a subject.

But admission was readily granted to a report of an unfavourable kind; a report more congenial with the part espoused by the editors of that publication. This report is concerning a child, who lately died of the small-pox after being supposed to have had the cow-pock. Mr. Faithhorn of Kensington, it is there said, can attest the fact. I have enquired of Mr. Faithhorn, and the following certificate will prove, that as far as his testimony is concerned, the report is destitute of foundation.

“ It having been stated, that a child of Mr. Meredith, of Kensington, who lately died of the small-pox, had been inoculated for the cow-pock, and regularly gone through  
the

the disease, and that I could testify the truth of this assertion; I hereby declare, that I never saw the child when under vaccination; and, that, from the account given to me by Mrs. Meredith, I am perfectly convinced he never had the cow-pock.

“ Mr. Wilson, surgeon, of Shadwell, and Mr. Cockle, surgeon, of High Holborn, saw the child with me; and after making every possible enquiry of the parents, were also of opinion that the child never had the cow-pock.

*Kensington, Sept. 21, 1804.*

JOHN FAITHHORN.”

In the account published, it is stated that there was a black scab after the pock. This is contrary to the account given by the mother to Mr. Faithhorn, Mr. Cockle, and Mr. Wilson, who first enquired into the subject. She afterwards gave a different account.

It appears, however, even by her confession, that the child was inoculated on Monday, and that Mr. Collurne never saw him but once after, while supposed to be under vaccination, which was on the Thursday following.

The report states, that Mr. Howard of Pimlico, had a share in inoculating the child. This is likewise false; that gentleman never saw the child when under inoculation; and was not in the neighbourhood of London at the time.

Mr. Merriman, another of the pretended witnesses, knows nothing of the matter. The name of Mr. Wilson of Windmill Street, is probably put down by mistake, instead of Mr. Wilson of Shadwell.

Finding the report so incorrect, I have not thought it worth while to call on all the gentlemen whose names are mentioned. I have, however made enquiries of Mr. Collurne, and the mother of the child, and have received the following information:

The child was inoculated by Mr. Collurne, who saw him again three days after. If at that time he formed any decisive opinion respecting the success of inoculation, it certainly was premature; but this will by no means justify an assertion, that the child had the cow-pock.

According to the mother's account, a pustule rose on each arm, but was rubbed off within a few days. It is, therefore, the more likely to have been of the spurious kind; which consists of only one cell, and is more elevated than the genuine cow-pock; and, on both these accounts, is more frequently ruptured.

I am, &c.

*New Street, Hanover Square.*

JOHN RING.

*Botanical*



*Botanical Description of British Plants.*

[ Continued from pp. 220—232. ]

40 BUNUM. *B. flexuosum.*

*Ang.* Earth, kipper, pig, hawk or far-nut; earth chesnut; lesser pig-nut.

*Gen. Desc.* Bloss. uniform: umbel crowded: Styles bent back, deciduous: seeds rather cylindrical, scored, thicker towards the end.

*Spec. Desc.* *Involucr.* from one to three leaves, deciduous. *Stem* leafless at the base, tapering downwards, zigzag. *Styles* permanent. *Root* tuberos, *Stem* smooth, scored, but little branched. Leaves doubly winged; segm. slender, tapering. *Involucr.* generally wanting. *Umbel* eight to twelve spokes. *Umbellule* sixteen sp. *Styles* at first close, afterwards straddling, never bent back. *Flowers* white. *Meadows, pastures, woods.* Bloss. May, June.

*Use.* These roots eaten either raw, or boiled, or roasted, are scarcely inferior to chesnuts, and would be an agreeable addition to our winter deserts.

41. CONIUM. *C. maculatum.* *Cicuta major.* *Cicuta vulgaris.*

*Ang.* Hemlock, common hemlock. *Kex.*

*Gen. Desc.* *Invocellum* going half-way round, of about three leaves. Fruit egg-shaped, bulging, ribs compressed, waved before the fruit is ripe.

*Spec. Desc.* *Seeds* without prickles. *Stem* branched, smooth, shining, spotted and streaked with blackish purple. *Involucel.* one leaf, div. into three and four; segm. at the edges white and membranous. *Lower leaves* dark green and shining. *Outer petals* largest. *Flowers* white. *Hedges, orchards, dunghills, rubbish, and cultivated ground.* Bloss. June, July.

*Use.* This plant has a peculiar faint fetid smell, and a slight aromatic and somewhat nauseous taste. That the plant is poisonous there can be no doubt, and numerous instances are recorded by various authors of its deleterious effects; but it seems probable, from some circumstances, that it is less powerfully so than was formerly imagined. That the root does not possess any noxious power whatever, several recent instances of its being repeatedly and largely eaten with impunity, have unequivocally been shewn. *Phil. Trans.* xix. p. 634. *Curtis Hor. Lond.* *Murray Ap. Med.* v. 1, p. 216. And Mr. Lane informed Mr. Curtis, that

that from his own experience he was of opinion "the roots might be cultivated in gardens, and either eaten raw like celery, or boiled as parsnips and carrots." Vinegar has been found the most useful in obviating the effects of the poison of hemlock, and by macerating or boiling the plant in vinegar it becomes totally inert.—*Lindenstolpe de venenis*. For the principal symptoms produced by immoderate doses of hemlock, see *Haller, Murray, &c.*—This was generally employed by the Greek and Arabian physicians as an external remedy for tumours, ulcers, and cutaneous eruptions; it was also thought to have the peculiar power "frangere stimulum venereum," et "incrementa mammarum et testium cohibere:" which seems the more remarkable, as *Stoerck, Bergius*, and others, recommend its internal use in complaints of a contrary nature, and adduce proofs of its aphrodisiacal powers. *Berg. Mat. Med.* p. 195. *Baron Stoerck* first brought it into repute as a medicine of extraordinary efficacy, and *Bergius* considers its *virtus* to be *narcotica, resolvens, suppurationem promovens diuretica*, and recommends its use in various disorders; others, however, have condemned it, and the value of this medicine seems still to be undetermined. There are no testimonies in this country, like the facts adduced by *Stoerck*, of inveterate schirruses, cancers, ulcers, &c. hitherto deemed irremediable, having been cured by it; but it has been found that several disorders, which had resisted other medicines, have yielded to hemlock, and that some, if not cancerous, at least of that tendency, have been relieved by it. In chronic rheumatisms, glandular swellings, &c. &c. and in the chin-cough, it is now generally employed. Externally, the leaves of hemlock have been variously applied with advantage to ulcers, indurated tumours, and gangrenes.—*Woodville*. The difficulty of preparing the extract, and its great uncertainty, render the use of it dangerous and doubtful. *Dr. Withering* says, that for some years he has laid it aside, and prescribed only the powder of the dried leaves, for which he recommends the following method of preparation: Let the leaves be gathered about the end of June, when the plant is in flower. Pick off the little leaves and throw away the leaf-stalks. Dry these selected little-leaves in a hot sun, or on a tin dripping-pan, or a pewter dish, before the fire. Preserve them in bags made of strong brown paper, or powder them, and keep the powder in glass vials in a drawer, or something that will exclude the light; for the light soon dissipates the fine green colour, and with its

its colour the medicine loses its efficacy. From fifteen to twenty-five grains of this powder may be taken twice or thrice a day. "I have found it peculiarly useful in *chronic rheumatisms*, and also in many of those diseases that are usually supposed to arise from acrimony. The nature of this book does not allow of minute details of the virtue of plants, but I can assure the medical practitioner that it is well worth his attention.—*Withering*, l. c. Mrs. Y. in Ireland, cured a poor woman of a cancer in the breast by hemlock pills taken inwardly, with stupes of the same plant.—*H. B.* Baron Stoerck used an *extract from the fresh root in spring*, in cancerous and scrophulous complaints.—*Lightfoot*.

42. PEUCEDANUM. *P. officinale*.

*Ang.* Sulphur-wort. Hog's fennel. Harestrong.

*Gen. Desc.* Involucr. very short. Fruit, elliptical, slightly ridged, compressed, bordered.

*Spec. Desc.* Leaves, five times divided into three, thread strap shaped. Petals, yellowish. Salt marshes. Bloss. June, July.

*Use.* The roots have a strong fetid smell, and an acrid, bitterish, unctuous taste. When wounded in the spring, they yield a considerable quantity of yellow juice, which dries into a gummy resin, and retains the strong scent of the root. Its virtues have not yet been ascertained with precision.—*Withering*.

43. CRITHMUM. *C. maritimum*. *C. siculum*.

*Ang.* Rock samphire.

*Gen. Desc.* Florets equal. Fruit oval, compressed.

*Spec. Desc.* Leaflets strap spear-shaped, fleshy. Flowers, white. Sea coast. Bloss. August.

*Use.* On the sea coast it is gathered for sale, being much used as a pickle: the poor people there eat it also as a pot-herb. Cows and sheep feed eagerly, and are said to grow fat upon it.—*Penn*.

44. HERACLEUM. *H. sphondylium*.

*Ang.* Cow parsnip. Madnep. Hog-weed. Parsnip hog-weed.

*Gen. Desc.* Involucr. shedding. Bloss. irreg. Petals bent inwards, notched. Seeds compressed, leaf like, smooth, encompassed by a membranaceous border.

*Spec. Desc.* Leaflets, wing-cleft, even. Flowers, radiated. Leaf stalks, at the base like a bag, scored, membranaceous, woolly at the edges. Stem-leaves, winged, hairy; leaflets, three pair, jagged, indented; odd one, three-cleft. Outer florets

florets radiated, the *central* nearly equal. *Flowers* white. *Seeds* with three ridges on each side. *Hedges, meadows, pastures.* *Bloss.* July.

*Use.* In Poland and Lithuania the poor prepare a liquor from the leaves and seeds of this plant, which, after undergoing a fermentation, is used as a beverage like ale. The stalks, peeled, are eaten by the Kamschatdales. The Russians prepare from this plant an eatable, which they esteem a great delicacy: they pick off the leaf-stalks of the root-leaves, peel them, and hang them in the sun to dry a little; they then tie them in little bundles, and hang them up again till they become yellow; in this state they are put into bags, and a mealy substance, like sugar, forms upon the surface of them; this is carefully shaken off, and served as a treat to the guests. They likewise distill an ardent spirit from it.—*Gmelin.* The peelings of the stalks are acrid. The leaves are a favourite food of rabbits, hogs, and asses: cows, goats, and sheep eat them; horses are not fond of them.—*Withering.* This plant has been found useful in *epilepsy*.—*H. B.*

45. *LIGUSTICUM.* *L. Scoticum.*

*Ang.* Scottish lovage. Sea parsley.

*Gen. Desc.* *Bloss.* equal. Petals rolled inwards, entire. Fruit oblong, tapering at each end, five ridges on each side.

*Spec. Desc.* Leaves doubly three-fold, glossy underneath. *Little leaves* oblong, wedge shaped, entire below, above serrated irregularly. *Rocks by the sea side.* *Bloss.* July.

*Use.* The root of this plant is reckoned a good carminative; an infusion of the leaves is said to be a good *purge for calves.* It is much valued in the isle of Sky, and is besides used as food, eaten either as sallad, or boiled as greens.—*Pennant.* Horses, sheep, and goats eat it: cows refuse it.—*Withering.*

46. *ANGELICA.* *A. archangelica.* *A. sativa.*

*Ang.* Garden angelica.

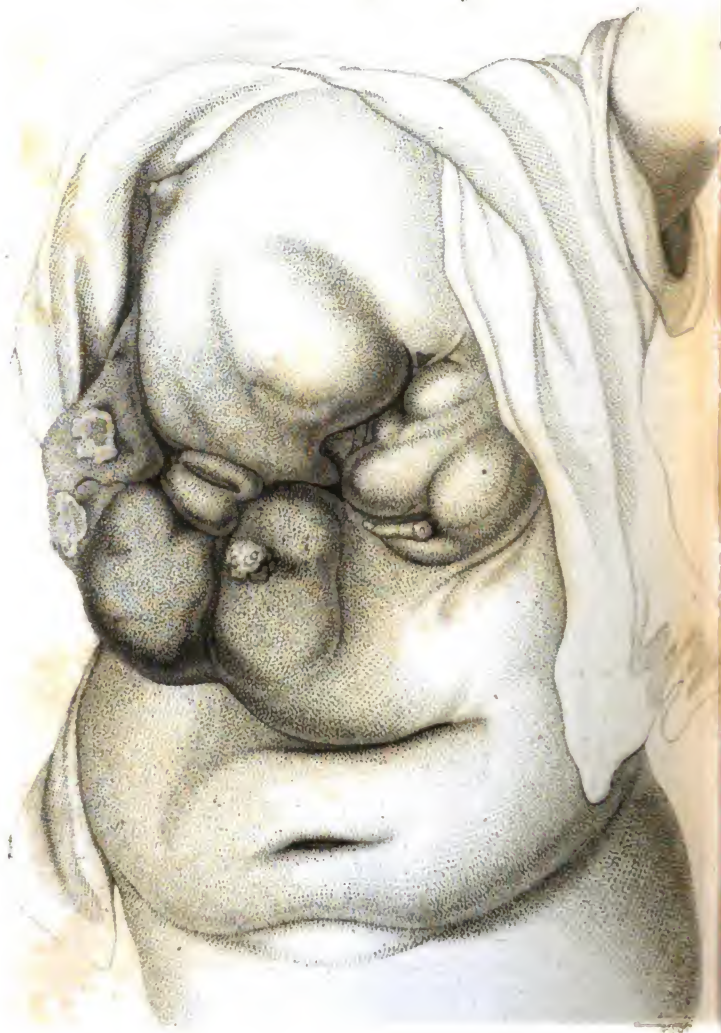
*Gen. Desc.* *Bloss.* equal, pet. bent inwards: styles reflected; fruit roundish.

*Spec. Desc.* Leaves winged; *leaflets* unequally serrated, odd one three-lobed; the serratures broad and of a lopped appearance at the base: Involucell. sometimes longer than umbellule. *Broadmoore, near Birmingham.* *Bloss.* Sept.

*Use.* The medical character of angelica has made it an object of cultivation to the English gardener for more than two centuries. The stalk, leaves, seeds, but more particularly



*Mr. Leeson's Case of Semiofseus Tumour.*



*Med. Journal N<sup>o</sup> 19*

*Printed for Richard Phillips, 7, St. Pauls Churchyard, Oct. 1809.*

larly the root, have a fragrant agreeable smell and a bitterish pungent taste: on being chewed they are at first sweet, afterwards acrid, and leave a glowing heat in the mouth. "The fresh root, wounded early in spring, yields from the inner part of the bark an unctuous yellowish odorous juice, which gently exsiccated retains its fragrance, and proves an elegant aromatic gummy resin."—*Lewis*. Linnaeus says, that the Laplanders entertain a very high opinion of the utility of this plant, as food and medicine, which is natural, as few aromatic plants inhabit the polar regions. Bergius thus enumerates its virtues: *Alexiteria, stomachica, sudorifera, carminativa*; and it has been recommended in female diseases; yet though it must be allowed to possess aromatic, and what are called carminative powers, it is in these qualities surpassed by other simples, and therefore seldom employed in the present practice.—*Woodville*. It is commonly used for a confection or sweetmeat; and employed in some distilled waters.

47. ANGELICA. *A. sylvestris*.

*Ang.* Wild angelica.

*Gen. Desc.* As above.

*Spec. Desc.* Leaflets equal, egg-spear shaped, serrated finely and regularly. Spokes to forty; Fruit stalks to eighty. *Involucr.* generally 0. *Involucel.* permanent. *Bloss.* white, tinged with red. *Seeds*, border membranaceous, three ridges on the outer side. *Marshy woods and hedges.* *Bloss.* June, July.

*Use.* It is warm, acrid, bitter, and aromatic, possessing all the qualities of that cultivated in our gardens (*see Prec. Art.*); but as the latter possesses these properties in a higher degree, this has been long neglected. Cows, goats, and swine eat it; horses refuse it.—*Withering*.

48. Sium. *S. nodiflorum*.

*Ang.* Creeping water parsnip, or skerret.

*Gen. Desc.* *Involucr.* many leaved. Petals heart-shaped. Styles bent back; fruit roundish.

*Spec. Desc.* Leaves winged; leaflets, tooth-serrated; umbels lateral, opposite the leaves. Flowers, white. Stem and branches, trailing or floating on the water. *Involucr.* deciduous. *Rivers and ditches.* *Bloss.* July, Aug.

*Use.* The efficacy of this plant is thus attested by Dr. *Withering*: "A young lady, six years old, was cured of an obstinate cutaneous disease by taking three large spoonfuls of the juice twice a day." Dr. W. has repeatedly given to adults three or four ounces every morning in similar

similar complaints with the greatest advantage: it is not nauseous, he adds, and children take it readily if mixed with milk. In the doses of it given by him, it affected not either the stomach, the bowels, or the head.—*Withering*. It has lately been admitted into the Mat. Med. of the London College, in the character of an *antiscorbutic*, or rather as a corrector of acrid humours, especially when manifested by cutaneous eruptions, and tumours in the lymphatic system, on the testimony of Beiric and Ray.—*Woodville*.

49. *CENANTHE*. *C. crocata*. *Filipendula cicutæ facie*.

*Ang.* Hemlock-dropwort. Dead tongue.

*Gen. Desc.* Florets of different shapes, the central fl. sitting, barren. Fruit with a cork-like coat, oblong, scored; crowned by permanent styles and calyx.

*Spec. Desc.* *Leaves*, many-cleft, blunt, nearly equal, some winged, some doubly winged. *Little leaves*, wedge shaped, smooth, streaked, jagged. *Petals* white, acute, bent inwards. *Involucr.* wanting, or of five strap-shaped leaflets, readily falling off. *Umbellule*, nearly globular. *Gen. Bloss.* not very unequal. *Watery places, banks of rivers and ditches.* Bloss. June, July.

*Use.* An infusion of the leaves, or three tea spoonsfull of the juice of the root taken every morning, effected a cure in a very obstinate *cutaneous disease*; but it was not without occasioning very great disturbances in the constitution. See *Dr. Pulteney's letter*, *Phil. Trans.* lxii. p. 469. The whole of this plant is *poisonous*; and *Dr. Pulteney* remarks, that of all the vegetable poisons produced in Great Britain, the root of this plant is the most virulent. Many instances of its fatal effects are recorded; for which see *Phil. Tr. ib. and vol. i. p. 856.* *Gent. Mag.* July, 1747, Mar. 1755, Sept. 1758. It is made use of by the country people in Westmoreland as an application, in the form of a poultice, to the ulcer, which forms in the fore part of the cleft of the hoof in horned cattle, and is called *the foul*.—*Withering*. This plant has been sometimes mistaken for celery, to which it bears some resemblance; but it is a *terrible poison*, and even the smell of it is deleterious: a vomit is the best remedy for those who have eaten of it. A spoonful of the juice given to a dog, rendered him sick and stupid: a goat eat it with impunity.—*Lightfoot*. For instances of its deleterious effects, see *Dr. Woodville*, *Sir William Watson*, *Phil. Trans.* vol. xlv. *Allen Synop. Med &c.*



50. PHELLANDRIUM. *P. aquaticum*. *Cicutaria palustris*.  
*Faniculum aquaticum*.

*Ang.* Water hemlock. Horsebane.

*Gen. Desc.* Central florets smallest; fruit egg shaped, smooth; crowned with the pistil and the calyx.

*Spec. Desc.* Ramifications of the leaves straddling. *Stem* very thick. *Leaves*, under water long, hair like. *Petals*, white. *Rivers, ditches, pools*. *Bloss.* June, July.

*Use.* The medicinal quality of this plant now rests chiefly on the testimonies of Erstingius and Lange, by whom various cases of its successful use are published, especially in wounds and inveterate ulcers of different kinds, and even in cancers; also in *phthisis pulmonalis*, *asthma*, *dyspepsia*, *intermittent fevers*, &c. About two scrs. of the seed, two or three times a day, was the ordinary dose given. Boerhaave speaks highly of its discutient power in all kinds of tumours. *Hist. Plant. Hort. Ludg. Bat.* 1. p 94. The medicinal qualities of these seeds are not satisfactorily ascertained, but they appear to be well deserving of further investigation.—*Woodville*. The seeds are recommended in intermittents; and are said to be *diuretic*, *antiseptic*, and *expectorant*: dose one to three drachms daily.—*Dr. Lange*. The leaves are sometimes added to *discutient* cataplasms. It is commonly esteemed a fatal poison to horses, occasioning them to become paralytic; but this effect is owing to a certain insect (*the curculis paraplecticus*) which generally inhabits within the stems. The usual *antidote* is pig-dung. In winter, the roots and stem, dissected by the weather, afford a very curious skeleton or net-work. Horses, sheep, and goats eat it; swine are not fond of it; cows refuse it.—*Withering*.

51. CICUTA. *C. virosa*. *C. aquatica*. *Sium alterum*.

*Ang.* Long leaved water hemlock. Water cowbane.

*Gen. Desc.* Fruit nearly egg shaped, ribbed.

*Spec. Desc.* *Leaves*, winged; *leaflets*, spear shaped, in threes, serratures white at the point. *Stem*, four feet high, reddish below. *Fruit-stalks*, sheathed at the base. *Umbel* expanding, red at the base. *Styles*, upright, white, in the fruit straggling. *Fruit*, compressed, even, lopped. *Petals*, yellow green. *Pools*. *Bloss.* July, Aug.

*Use.* As an internal medicine this is universally superseded by the common hemlock; but externally employed in the way of poultice, it is said to afford relief in various fixed pains, especially those of the *rheumatic* and *arthritic* kind.

kind. In its dried state, Bergius tells us, it may be taken in considerable quantities without producing any bad effect; but the root, when fresh, is extremely deleterious. The symptoms produced upon some children, who ate of it for parsnip root, were intoxication, vertigo, great heat and pain in the stomach, convulsions, and even epilepsy, distortions of the eyes, vomiting or retching, discharge of blood from the ears, swelling of the abdomen, hiccup, spasms, &c. In a man, delirium, with constant heat of the stomach, and unextinguishable thirst, were of long continuance, and followed by an erysipelatous tumour in the neck. See *Eph. Nat. Cur. Cent. 10. Obs. 58. p. 355.* The timely administration of an emetic is the only remedy.—*Woodville.* It is one of the rankest of our vegetable poisons. Numerous instances are recorded of its fatality to the human species in a treatise upon it by *Wepfer* and by *Haller*, as well as in the *Phil. Trans. abr. x.* Early in the spring, when it grows in the water, cows often eat it, and are killed by it; but as the summer advances, its scent becomes stronger, and warns them carefully to avoid it. But, though it is a certain and fatal poison to horned cattle, goats devour it greedily and with impunity. Horses and sheep also eat it with safety.—*Withering.*

52. *ÆTHUSA. A. cynapium.*

*Ang.* Fool's parsley, or cicely. Lesser hemlock.

*Gen. Desc.* Involucell. reaching half way round, three-leaved, bent downwards; fruit nearly globular, deeply furrowed.

*Spec. Desc.* *Leaves*, all alike, doubly winged, smooth, glossy dark green; *leaflets* div. into segm. subdiv. into three or five. *Stem.* one and a half to two feet high, branched. *Umbel.* often eighteen sp. *Flowers*, whitish. *Corn fields, kitchen gardens.* Bloss. August, Sept.

*Use.* From the resemblance of this plant to common parsley, it has often been mistaken for the latter; and when eaten, it occasions sickness. It is noxious to geese. Horses, cows, sheep, goats, and swine eat it.—*Withering.*

53. *ÆTHUSA. A. meum. Athamanta meum. Ligusticum meum. Seseli meum.*

*Ang.* Spignel. Spicknel. Men. Bald or bawd money. Spignel cicely.

*Gen. Desc.* As above.

*Spec. Desc.* *Leaves* divided into many bristle-shaped segments; *involucr.* 1; leaf, sometimes none; *fruit*, egg oblong

long, tapering at each end. *Petals*, white. *Mountainous pastures*. Bloss. May.

*Use*. Linnæus says, that the radical fibres of this plant, form the basis of the calculus ægagropila, but though I have examined several of these balls, I never found it so. *Mr. Gough*. The roots and seeds are aromatic and acrid. They have been used as stomachics and carminatives; sometimes they are given to cure tertians; and there is no doubt but they will often answer, as well as pepper, and other acrid aromatics.—*Withering*.

54. CORIANDRUM. *C. sativum*. *C. majus*. *C. vulgare*. *Ang*. Common coriander.

*Gen. Desc*. Bloss. radiated; petals bent inwards, notched at the end; involuc. one leaf; involucell. reaching half way round; fruit globular, smooth.

*Spec. Desc*. *Fruit* globular. Whole plant smooth. *Leaves* cut into very slender strap shaped segments. *Proper calyx* five leaves, permanent. *Styles* permanent, reflected. *Outer florets* of umbellules barren; petals larger, expanding, radiated; *central florets* fertile; *petals* equal, bent inwards. *Flowers* whitish. *Seeds* two, united, so as to form a globe. *Corn-fields, road-sides, dunghills*. Bloss. June, July.

*Use*. The leaves and every part of the plant, when fresh, have a very offensive odour, like bugs; but upon being dried, the seeds have a tolerably grateful smell, and their taste is moderately warm and slightly pungent. These seeds, it is asserted by Dioscorides, if taken in any considerable quantity, produce deleterious effects; and in some parts of Spain and of Egypt, where the fresh herb is eaten as a cordial, instances of fatuity, lethargy, &c. are observed to occur very frequently,—*Hoffman*; but these properties seem to have been unjustly ascribed to the coriander; and Dr. Withering says, that though they have been considered as suspicious, if not deleterious, he has known six drachms of them taken at once without any remarkable effect. These seeds, like those of most of the umbelliferous plants, possess a stomachic and carminative power; but they are principally of use, according to Dr. Cullen, "as correctors of the bitter infusion and the preparations of senna, nothing so powerfully covering its disagreeable odor and taste, and it being equally efficacious in obviating the griping that senna is very ready to produce." *Woodville*; *Cullen Mat. Med. ii. p. 153*. The seeds in-  
(No. 68.) B b crusted

crusted with sugar are sold by confectioners, under the name of coriander comfits.

55. SCANDIX. *S. odorata*.

*Ang.* Sweet Cicely. Shepherd's needle. Great sweet chervil. Sweet fern.

*Gen. Desc.* Bloss. radiated; central florets frequently male; petals notched at the end; styles permanent; fruit awl-shaped.

*Spec. Desc.* Seeds furrowed, angular, longer than the umbellules, of a sweet and agreeable taste. Leaves treble winged; little leaves with winged clefts; segments deeply and sharply serrated. Flowers white. Whole plant of an aromatic scent. Orchards and waste places, but always near houses. Bloss. June.

*Use.* The seeds of this plant are very commonly used in the north of England for polishing and perfuming oak floors and furniture.—Woodward.

56. SCANDIX. *S. cerefolium*.

*Ang.* Common chervil. Chervil shepherd's needle.

*Gen. Desc.* As above.

*Spec. Desc.* Seeds glossy, cylindrical, beaked. Umbels generally lateral, nearly sitting. Leaves exceedingly delicate. Spokes woolly, four, sometimes three or five; of umbellule ten and twelve. Involucr. leaf strap shaped. Bloss. white. Hedges. Bloss. May.

*Use.* This plant is slightly aromatic and aperient. It is frequently cultivated in our gardens as a pot herb, and is used in sallads. Cows are extremely fond of it; sheep and goats eat it; horses refuse it.—Withering.

57. CHEROPHYLLUM. *C. sylvestre*. Myrrhis.

*Ang.* Wild Cicely. Cow weed. Cow parsley. Cow weed chervil.

*Gen. Desc.* Involucell. reflected, concave; petals heart shaped, bent inwards; fruit shining, generally smooth, oblong.

*Spec. Desc.* Stem smoothish, scored, swollen at the knots, woolly. Central florets of umbellules often barren. Flowers white. Hedges, orchards, pastures. Bloss. May, June.

*Use.* In some parts of the kingdom, in times of scarcity, this plant is eaten as a pot-herb.—Curtis. The roots have sometimes been eaten as parsneps, but they have been found poisonous. The umbels afford an indifferent yellow dye; the leaves and stem a beautiful green. Its presence indicates a fruitful soil. Neither horses, sheep, goats, nor swine are fond of it; rabbits eat it greedily; and cows are very

very fond of it, so much so, that when, as often happens about Dudley, a pasture is over-run with it, cows are turned in to eat it up.—*Withering*.

58. IMPERATORIA. *I. ostruthium*. *Astrantia vulgaris*. *Magistrantia*.

*Ang.* Common masterwort.

*Gen. Desc.* Petals bent inwards, notched at the end; seeds compressed with a broad membranaceous border, and three ridges on the back.

*Spec. Desc.* But one species has been described. *Banks of the Clyde*. BLOSS. June.

*Use.* The root has a fragrant smell and a bitterish pungent taste, leaving for some time a glowing warmth in the mouth. This plant was formerly, as its name imports, thought to be of singular efficacy, and was preferred to most of the other aromatics, for its alexipharmic and sudorific powers. In some diseases it was employed with so much success as to be distinguished by the name of “divinum remedium.”—*Hoffman*. At present, however, this root being considered merely as an aromatic, is superseded by many of that class, of superior character; half a drachm of the root in substance, and one drachm of it in infusion, is the dose directed.—*Woodville*. The root is warm and aromatic; it is a *sudorific*, a *diuretic*, and a *sialogogue*; recommended in *dropsy* and *debilities* of the stomach and bowels; and an infusion of it in wine, is said to have cured *quartans*, which had resisted the bark.—*Dr. Stokes*. When chewed it excites a copious flow of saliva, exciting a warm and not disagreeable sensation in the gums, and frequently curing the rheumatic *tooth-ache*.—*Withering*. It should be dug up in winter, and a strong infusion made in wine.—*Lightfoot*.

59. PASTINACA. *P. sativa*.

*Ang.* Wild parsnep. *The garden parsnep is a variety, altered only by culture*.

*Gen. Desc.* Petals rolled inwards, entire; seeds elliptical, compressed, leaf-like, smooth; border thin, narrow.

*Spec. Desc.* Leaves simply winged. Stem three or four feet high, membranaceous at the corners. *Involucr.* 0. *Umbel* spokes six to twelve; *Umbellule* spokes short, numerous. *Involucellum* sometimes one leaf. *Flowers* yellow. *Borders of ploughed fields, in lime-stone*. BLOSS. June, July.

*Use.* The roots of this plant are sweeter than carrots, and, when improved by garden culture, are an excellent vegetable for the table, and much used by those who ab-

stain from animal food in Lent; they are highly nutritious. In the north of Ireland they are brewed instead of malt, with hops, and fermented with yeast; the liquor thus obtained is agreeable. The seeds contain an essential oil; and will often cure intermittent fevers. Hogs are fond of the roots, and quickly grow fat upon them.—*Withering.*

[ To be continued. ]

### *To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

**I**N your Review of my work on the *Cortex Salicis Latifolia*, vol. x, p. 374, *Medical and Physical Journal*, you say, “The virtues of the *various species* of willow bark have long been ascertained, and fully established, but the *salix* has not been formally received into our *Materia Medica*.”

These remarks, indeed, are the more extraordinary, as neither Mr. Stone, Mr. James, Mr. White, nor myself, have been aware, how, or by whom, we have been anticipated in our labours.

The former gentleman, Mr. Stone,\* wrote on the *salix alba*, or common white willow, which Mr. James† found, as well as some others of its species, on repeated trials, to be superior to the *salix latif.* and it does not yet appear, that he has been anticipated by any English authors whatever on this subject; although *Classius*, and *Gunzius*, two foreign physicians, are said to have written on the bark of the willow; but not being able to procure their Treatises, Mr. James, and myself, are quite at a loss, what, or how many species of the willow they have described. This leads me to hope, that by your friendly assistance, we may be enabled to ascertain the truth of what you have asserted, viz. “That the virtues of the *various species* of willow bark have long been ascertained, and fully established.”

I have remarked in my work,‡ that Evelyn, in his Discourse

\* Vide *Philosophical Transactions*, vol. liii. p. 197.

† Observations on the Bark of a particular Species of Willow, by S. James.

‡ Experiments and Observations on the *Cortex Salicis Latifolia*, p. 24, et seq.

course on Forest Trees, has named thirty-one varieties of the *salix*, though he has described but fifteen; Steph. Robson in his British Flora, eighteen; and Withering in the last edition of his Arrangement of British Plants,\* published by his son, has noticed and described twenty-two species; hence there remains nine more, to make up the number of thirty-one varieties of this *genus*; but how, or by what authors the *virtues*, even of the twenty-two *varieties*, have been *ascertained*, and *fully established*, with me is a doubt, that you will I trust admit, requires explanation.

It is farther asserted by you, in your *Critique*, that you have no doubt, "That the willow bark (by which I suppose you mean the *salix latifolia* in general) properly administered, will cure intermittents, will have a salutary effect in supporting the strength of the constitution under copious suppurations, and other debilitating circumstances, &c." Nevertheless, you question the superiority I apprehend it possesses over the *cinchona*; which difference of opinion can only be thus accounted for. I have considered it (the *salix*) in a general point of view, and you in the abstract, by your supposing the *cinchona* to be always *genuine*; which is not the case. My reasons for preferring the *salix* to the *cinchona* are, that in *decoction* it is equal, if not superior to the latter, even when *genuine*, and given in *powder*; as it is well known, that in this form it is not only apt to sit uneasy on the stomach, often producing nausea and vomiting, but when retained, brings on troublesome diarrhœa, whereby its good effects become abortive; whereas the former, by proving much more agreeable in a liquid form, *rarely*, if *ever*, disagrees with the patient, and is by no means apt to run off by the intestines,

Whether the *Cinchona* administered to the patients who were the subjects of my Cases, might or might not be "*genuine or good*," is not for either of us to determine; more especially, as it was employed by other practitioners prior to their entering on the use of *my salix decoction*, (in powder). Though this latter mode of using it is generally deemed more efficacious than any other, yet the *salix* was universally preferred, for its being more agreeable to the tastes, and by sitting more easy on the stomach; which, in the form of decoction, must be allowed to be of no small advantage; for when we reflect on the *genuineness* of the

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\* Arrangement of British Plants, vol. i. p. 100.

conveniencies attendant on the use of the powder, even of *genuine and good* cinchona, when obliged to be employed in large and repeated doses, in order to produce decisive effects in formidable diseases, inconveniencies which do not attach to the use of the *salix*; it will certainly appear to be of no small importance to it, as a medicine.

If I have appeared to undervalue the *bitterness* contained in the different species of the cinchona, which I am not conscious of having done, it is on the following principles, viz. That vegetables possessing *bitterness* are accounted *tonic*, and even have been considered as *antiseptics*, though not possessing *tan*; the latter principle having been proved by my experiments\* to resist putrefaction of animal substances in preference to *bitterness*. The same terms have been applied to such vegetables as contain *tan*, and bitterness,† though with more propriety than in the former case. Be this as it may, it seems pretty generally admitted, that vegetables not possessing *tan* have fallen short of the effects of those which contained it; e. g. cham. absinthium gentian cort. aurant. amar. angustura, quassia, &c. are inferior to the cinchona, as *febrifuges*, while the *salix latifolia*, and some others of a similar quality, appear even *sine amaritiè*, to excel the cinchona.

How far bitterness may be found *essentially* necessary towards the perfection of vegetable tonics, as *febrifuges*, is not for me to determine. In the cases of intermittents and typhus, in which I have administered the *salix*, it did not appear defective from a want of this property; nor, for any thing we know, is it *essential* to its effects in preventing the return of the paroxysms of febrile diseases, whatever it may be in some diseases of the chylopoetic viscera, in which bitters combined with *tonics* are known to prove salutary. Nor would it be fair to determine on its effects *comparatively* with the *cinchona*, by combining it with *bitterness*, or any other principle that might influence its effects as a medicine, more especially where the cinchona is trusted to as the sheet anchor.‡

All

\* Vide my Experiments and Observations on the *Salix Latifolia*.

† Intense bitterness in vegetables possessing *tan*, is not perhaps so common as in those that contain little or none. The *salix pentandria*, or bay leaved willow bark, is however found to be very similar to the cort. flav. as it possesses *tan*, and bitterness nearly equal to it.

‡ This is to be understood in cases of intermittents, fevers, gangrene, weakening discharges from abscesses, &c. and even in those fevers termed putrid or malignant.



All *formulae* of the Peruvian bark, such as decoction, tincture, extract, powder, &c. notwithstanding the experience of their inefficacy, when given *singly*, in some diseases, have been found, when combined with intense bitters, chalybeates, and other powerful auxiliaries, to be attended with uncommon success. This has induced me to suspect its *real* utility in such cases, more especially as it cannot be denied but that the same ingredients, *sine cortice*, have been known to produce similar effects.

I advance not these remarks from caprice, or prejudice against the cinchona, (*or its admirers*); they are adduced as, at least, presumptive proofs of imperfections that exist in no small degree in medical practice, and which regular practitioners would do well to turn over in their minds, thereby to enable them to ascertain, with accuracy, the specific or active properties resident in powerful remedies.

Thus much have I deemed it necessary to say, in support of my opinion of, and predilection for, the *Salix Latifolia*, which I would have done long ago, had health permitted. I now, Gentlemen, take the liberty of thus addressing you on the subject, hoping you will allow these my observations a place in your valuable Repository; and respectfully solicit your attention, particularly to what relates to the commencement of my Paper, as it is with me a matter of no small importance.

I am, &c.

Sunderland, Sept. 13, 1804.

G. WILKINSON.

### *To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

IT is as easy to know some men by their style and turn of sentiment as by their faces. Few of your Readers, I apprehend, will doubt, nor have I much hesitation in considering my friend, Dr. Kinglake, as the author of the letter signed CANDIDUS, in your last Journal. I trust he will not quote it as evidence in the second edition of his DISSERTATION ON GOUT, provided I shall not be able to convince him and the world of the dangerous tendency of his doctrine before a second edition be called for. The Doctor thought it right to advertise for the real signature of E. O. and found him to be a very modest, ingenuous young  
 B b 4 man,

man, with, as he declares himself, very little experience. The same step was unnecessary, or I am grossly mistaken, with regard to *PERSCRUTATOR*; for who wrote that letter, I think, he who runs may read. But the Doctor does not seem very delicate in his selection of materials, in assisting him to make a book: however, as this last letter really does him so much credit on the score of *candour* at least, I am surprised that he should not have thought it right to have had his own name affixed to it. So far are we indebted to the word *liberal* in one of my letters, which I acknowledge to have produced the very effect I intended; and I congratulate the Doctor on his recovery from the influence of that *unlucky* letter of *A Constant Reader*, which gave him so much cruel cause of offence. I hope, in future, he will attempt "*nihil facere per iracundiam*;" as he will now be able to judge dispassionately, how easy it is for intemperate zeal to injure the cause it is intended to support. To make more sure of the matter, however, I shall introduce the Doctor to my friend Leibnitz, who shall tell him a story about a Leyden cobbler.

"Quand on disutoit des Théses a l'Université de Leyde, un cordonnier ne manquoit jamais de se trouver a la dispute publique. Enfin, quelqu'un qui le connoissoit lui demanda, s'il entendoit le Latin? Non, dit-il, & je ne veux pas même me donner la peine de l'entendre. "Pourquoi venez-vous donc si souvent dans cet auditoire, ou l'on ne parle que Latin?" C'est que je prends plaisir à juger des coups. "Et comment en jugez-vous sans savoir ce qu'on dit?" C'est que j'ai un autre moyen de juger, qui a raison. "Et comment?" C'est que quand je vois à la mine de quelqu'un qu'il se fache, & qu'il se met en colere, je juge que les raisons lui manquent."

But to our subject. The Doctor says, "*All this, it must be confessed, is new, not unplausible, and has a very generalizing tendency.*" That it is new, and has a very generalizing tendency I admit; but I also hope that the Doctor will be *candid* enough not to press the other point, when he has been so repeatedly told, that his doctrine is not only very *unplausible*, but very *dangerous* too. A City Alderman, for instance, or a *Common-council-man*, nay, even my Lord Mayor himself, with two pounds of turtle, as much venison, and three or four bottles of claret under his belt, may follow the Doctor's directions if they please; but I hope, nevertheless, I shall prove it unfit for ordinary patients.

I read as much of the DISSERTATION ON GOUT as I could

could, with a view to find out, "*that the disease is merely local, and unknown as a constitutional complaint;*" and own I missed it, unless it be contained in the following passage, page 19, "*That various causes connected with temperature, diet, and constitution, operating on systematic excitability, may from accidental preponderance of motive susceptibility on the ligaments and tendons, finally exert a concentrated or inflammatory influence on those parts, and thus induce the formal character of gout!*" I labour to be perspicuous, and really, sometimes at least, flatter myself that I am so; and know not what in my writings can be called "*elaborate and inexplicable suppositions, and theoretic declamation,*" by the author of the above rhapsody. The last and most plausible charge, which the Doctor brings against me is, that I profess to cure relaxation by relaxing means. I plead guilty to the charge; and will endeavour to explain this seeming paradox in a few words on this, because I have done it more at large on other occasions. By the application of steam then, and removing a part of the pressure of the atmosphere, I apprehend the paroxysm is often carried off at once along with the disposition in the parts to resist by a fruitless struggle its distensive power, or what the Doctor calls, "*its decomposition of organic structure by combustive force.*" I do not wonder that the Doctor from all his reasoning, should not know, that heat is more easily excited in young than in old subjects, and I suppose that he does not read Mr. Rigby's book, lest he should be convinced of this truth; alas! *nemo scit quam nescit.*

But facts are what the Doctor wants, and perhaps the following, which I am truly sorry at the necessity of recording, will suffice.

To the REV. J. N. FREEMAN,  
Hayes, near Southall, Middlesex.

Rev. Sir,

Though an entire stranger to you, I shall make no apology for addressing you on a subject which at present occupies much attention, and nearly concerns the well-being of thousands.

I have heard that Mr. Baker, a medical gentleman, of Uxbridge, died lately after having applied cold water, or ice, to the lower extremities, while labouring under gouty inflammation.

Mr. Reynolds, of Oxford Street, has assured me, that you will consider it a duty you owe society to communicate what you know of this matter; and I trust you will have

have no objection to do so to me, who am at present *conscientiously* combating the principle; and that you will not object, provided your statement suit my purpose, to permit me to lay it before the public.

" I am,

" Rev. Sir,

" Your's most obediently,

" RALPH BLEGBOROUGH."

August 21, 1804.

TO DR. BLEGBOROUGH,

Margaret Street, Cavendish Square, London.

" Sir,

" The Rev. Mr. Freeman, of Hayes, shewed me a letter yesterday from you, which I thought it right to communicate to the family of the gentleman lately deceased; and as they are extremely desirous, that all personal controversy should be avoided, they have requested me to inform you, that no detail of the case can be given to any person.

" Should circumstances, however, occur to induce them to alter their opinion, I propose to communicate it myself to the public, through the medium of the Medical and Physical Journal.

" I am,

" Sir,

" Your's, very respectfully,

" A. EDLIN."

Uxbridge,

August 24, 1804.

" There is a holy mistaken zeal in" Medicine "as well as in Religion. By persuading others we convince ourselves. The passions are engaged, and create a maternal affection in the mind, which forces us to love the cause for which we suffer." Out of tenderness to the friends of the deceased then, and that I may not increase the Doctor's attachment to his opinions by intemperate opposition, I think it most prudent to forego all comments on the above correspondence. In return, I trust, he will not call for more proofs from me; not because I am unprepared to give them, but because I am *tremblingly alive* to the feelings of other families, and other physicians. That such cases have not occurred to himself, can only arise from a contracted sphere of practice. That they may not occur to him in future, I trust he will avail himself of the fell experience of others. After having been prosecutor, counsel, and evidence, in his own cause, the Doctor *candidly* though reluctantly declines being judge, and calls on the public. I am satisfied with, and reverence the tribunal, and am confident of its verdict. I hope, however, I need  
not

not repeat, that I am far from wishing to explode altogether the abstraction of heat from parts labouring under gouty inflammation; for the truth of the matter is, that I do not think my experience, considerable as it has been, as yet sufficient to justify me in giving a decided opinion on a subject of so much importance.

I beg pardon if I have betrayed any warmth during this Controversy, which, I hope, is now brought to a close. In entering into it, I declare solemnly I was actuated by very different motives to what have been attributed to me. I, who am very irritable myself, should be the last person in the world to blame Dr. Kinglake for impetuosity. I am very sensible that, along with every other good thing, we receive our tempers and dispositions also from the Author of our being; and "*that it was He who made us, and not we ourselves.*"

I am, &c.

Margaret Street, Sept. 3, 1804.

RALPH BLEGBOROUGH.

P. S. As a member of the Committee, I take leave to inform your Bedfordshire Correspondent and Subscriber to Dr. Garnett's work, that it will be out very soon; in all probability, in the course of a month. I would willingly (as well on account of its intrinsic merit, as on behalf of his orphan children) and am sure I can confidently, recommend it to every medical gentleman and philosopher in the united kingdom. Nor do I think I can better close this communication, than with an extract from the Lecture on Gout.

"If the Gout were of a sthenic or inflammatory nature, might we not ask, why the causes which produce it, do not produce it in the meridian of life, when they produce their greatest effect, and when real sthenic diseases are most apt to occur? Or, why the symptoms of the inflammation, like all other sthenic inflammations, are not relieved by the debilitating plan? The contrary, however, points out to us clearly the nature of the disease: the gout is not a sthenic disease, nor a disease of strength; it does not depend on increased vigour of the constitution, and plethora; but is manifestly asthenic, like all the rest of the asthenic diseases. The mode of living is such as brings on indirect debility, or exhaustion of the excitability, such as the use of rich and highly seasoned food, and a daily use of fermented liquors. These, at first, certainly produce vigour, or strength, and will be the cause of sthenic diseases; but they are generally taken in such a manner, that

that though they produce a degree of excitement above the point of health, still they only approach the line of sthenic disease, without in general falling into it. They continue, however, to exhaust the excitability, and by the time that the vigour of the body begins naturally to decline, the system of a person who has lived in this manner is unusually torpid. All the blood-vessels, which have been hitherto distended with rich blood, begin to lose their tone, from their excitability having been exhausted by the use of these powerful stimulants; but this torpor is particularly and first experienced in those parts, which have been more immediately subject to the action of the exciting causes, viz. the stomach and bowels: symptoms of indigestion occur, and the excitability of these organs having been almost entirely exhausted by the violent action of the stimulants applied, cannot now be roused to any healthy action; the food is not properly digested, but runs into a kind of fermentation, which causes an extrication of gas; this distends the stomach and bowels, and produces pains, uneasy eructations, and all the distressing symptoms of indigestion. Nor is this in the least surprising, when we consider that many people, who have brought on complaints of this kind, have been in the habit of eating heartily of rich and highly seasoned animal food, and of drinking from a pint to a bottle of wine, and perhaps a quantity of malt liquor, almost every day of their lives, for years. This mode is sufficient to wear out the powers of the stomach, were it three times as capacious as it is; and of the constitution, were it ten times as strong.

“When a torpor, or state of exhausted excitability of the whole system, has been induced in this manner, and symptoms of indigestion produced, any directly debilitating cause applied to the extremities, adding to the indirect debility, causes a total torpor or inactivity of the minute vessels of the part, and thus totally destroys the balance between the propelling and resisting force; hence the vessels will be morbidly distended with blood, a swelling and redness will take place, and an asthenic inflammation produced in the way which I fully pointed out in the last Lecture will be established. Hence the pain and other symptoms which accompany a fit of the gout; hence likewise we see, why debilitating powers, applied to the part, will not reduce the inflammation; and why a warmth, which aggravates every really sthenic inflammatory affection, is so comfortable in this.”

*A Mc-*

*A Meteorological Table, by Dr. HIGGINS, of Brompton.*

| Days<br>of the<br>Month. | Thermometer.          |       |                      | Height of the Barometer. Inches. |       |                      | Weather. |
|--------------------------|-----------------------|-------|----------------------|----------------------------------|-------|----------------------|----------|
|                          | 8 o'Clock<br>Morning. | Noon. | 10 o'Clock<br>Night. | 8 o'Clock<br>Morning.            | Noon. | 10 o'Clock<br>Night. |          |
| 1804.                    |                       |       |                      |                                  |       |                      |          |
| Aug. 20                  | 58°                   | 62°   | 60°                  | 29.98                            | 29.96 | 29.96                | Cloudy.  |
| 21                       | 60                    | 62    | 59                   | 30.02                            | 30.02 | 30.03                | Cloudy.  |
| 22                       | 58                    | 62    | 57                   | .09                              | .10   | .18                  | Cloudy.  |
| 23                       | 58                    | 60    | 57                   | .33                              | .36   | .36                  | Cloudy.  |
| 24                       | 58                    | 62    | 59                   | .40                              | .35   | .33                  | Fair.    |
| 25                       | 57                    | 62    | 60                   | .35                              | .38   | .41                  | Cloudy.  |
| 26                       | 60                    | 64    | 61                   | .52                              | .49   | .45                  | Fair.    |
| 27                       | 61                    | 63    | 62                   | .41                              | .37   | .29                  | Fair.    |
| 28                       | 63                    | 67    | 65                   | .32                              | .31   | .30                  | Fair.    |
| 29                       | 68                    | 72    | 70                   | .29                              | .24   | .11                  | Fair.    |
| 30                       | 70                    | 74    | 70                   | 29.96                            | 29.94 | 30.00                | Fair.    |
| 31                       | 71                    | 73    | 70                   | 30.14                            | 30.08 | 30.06                | Fair.    |
| Sept. 1                  | 68                    | 70    | 66                   | .11                              | .18   | .29                  | Fair.    |
| 2                        | 64                    | 66    | 64                   | .34                              | .35   | .32                  | Fair.    |
| 3                        | 64                    | 66    | 63                   | .34                              | .35   | .36                  | Fair.    |
| 4                        | 65                    | 69    | 67                   | .46                              | .45   | .44                  | Fair.    |
| 5                        | 68                    | 70    | 66                   | .44                              | .38   | .35                  | Fair.    |
| 6                        | 67                    | 70    | 65                   | .22                              | .14   | .03                  | Fair.    |
| 7                        | 66                    | 70    | 64                   | .04                              | .12   | .15                  | Fair.    |
| 8                        | 65                    | 70    | 63                   | .33                              | .32   | .35                  | Fair.    |
| 9                        | 65                    | 70    | 62                   | .35                              | .27   | .26                  | Fair.    |
| 10                       | 63                    | 68    | 63                   | .12                              | .09   | .07                  | Cloudy.  |
| 11                       | 65                    | 70    | 64                   | .24                              | .28   | .33                  | Fair.    |
| 12                       | 66                    | 78    | 68                   | .32                              | .21   | .15                  | Fair.    |
| 13                       | 67                    | 76    | 70                   | .11                              | .09   | .06                  | Fair.    |
| 14                       | 66                    | 76    | 70                   | .03                              | 29.96 | 29.94                | Fair.    |
| 15                       | 68                    | 75    | 69                   | 29.99                            | .96   | .94                  | Fair.    |
| 16                       | 69                    | 78    | 70                   | 30.04                            | 30.09 | 30.16                | Fair.    |
| 17                       | 68                    | 72    | 64                   | .23                              | .26   | .29                  | Cloudy.  |
| 18                       | 64                    | 66    | 63                   | .31                              | .34   | .30                  | Cloudy.  |
| 19                       | 63                    | 65    | 63                   | .27                              | .21   | .17                  | Fair.    |

The monthly communications of Dr. H. will be particularly acceptable to the Editors; but they wish him to state, for the information of their readers who reside at a distance from the Metropolis, the elevation of his house above the river Thames, at Chelsea, and the direction of it on the compass from St. Paul's, that the course of the winds on the respective days may be taken into the account, which will much increase the value of the information.

*Account of Diseases in an Eastern District of London,  
from August 20 to Sept. 20, 1804.*

|                     |   |                 |                        |   |   |   |   |    |
|---------------------|---|-----------------|------------------------|---|---|---|---|----|
| ACUTE DISEASES.     |   | Cephalalgia     | -                      | - | - | - | - | 5  |
| Typhus              | - | -               | -                      | - | - | - | - | 3  |
| Pneumonia           | - | -               | -                      | - | - | - | - | 2  |
| Dysenteria          | - | -               | -                      | - | - | - | - | 3  |
| Cholera             | - | -               | -                      | - | - | - | - | 4  |
| Rheumatismus Acutus | - | 7               | Vermes                 | - | - | - | - | 3  |
| CHRONIC DISEASES.   |   | Podagra Atonica | -                      | - | - | - | - | 1  |
| Tussis              | - | -               | -                      | - | - | - | - | 9  |
| Dyspnœa             | - | -               | -                      | - | - | - | - | 5  |
| Tussis cum Dyspnœa  | - | 10              | Rheumatismus Chronicus | - | - | - | - | 15 |
| Pleurodyne          | - | -               | PUERPERAL DISEASES.    |   |   |   |   |    |
| Phthisis Pulmonalis | - | 3               | Ephemera               | - | - | - | - | 7  |
| Hydrothorax         | - | -               | Menorrhagia Lochialis  | - | - | - | - | 8  |
| Ascites             | - | -               | Mastodynia             | - | - | - | - | 4  |
| Hysteria            | - | -               | INFANTILE DISEASES.    |   |   |   |   |    |
| Chlorosis           | - | -               | Tabes Mesenterica      | - | - | - | - | 1  |
| Diarrhœa            | - | -               | Aphthæ                 | - | - | - | - | 4  |
| Colica              | - | -               | Vermes                 | - | - | - | - | 2  |
| Gastrodynia         | - | -               | Diarrhœa               | - | - | - | - | 6  |
|                     |   |                 | Dentition              | - | - | - | - | 1  |

## MEDICAL AND PHYSICAL I N T E L L I G E N C E.

[ FOREIGN AND DOMESTIC. ]

### *Method of preparing Gallic Acid, by Mr. Fiedler.*

Boil one ounce of galls in sixteen ounces of water till it is reduced to eight ounces; separate the extractive matter from the acid by mixing with the liquor as much of pure argil as would make two ounces of sulphat of argil, and after some time filtrate the liquor. According to the author, the tannin, the extractive matter, and all the heterogeneous bodies, will remain on the filtre, combined with the argil, while the gallic acid is dissolved in the liquor that passes through.

Dr. KEUTSCH, a very able physician, resident in the Danish Island of Santa Cruz and St. Thomas, in the West Indies, has lately discovered a new method, and hitherto very successful, of treating the fevers of those Islands, so fatal to Europeans. His process



process consists in frictions by oils. The first idea of this method he derived from the Theory of Dr. Scheel, of Copenhagen, on the use of oil in the plague: A theory which is to be found printed in the work of Baldwin. Of eight soldiers that were entrusted to the care of Dr. Keutsch, six were happily delivered from the fever, at the end of twenty-four hours, by means of these frictions. They produced violent sweats, and always put a stop to vomiting. The doctor, in some particular cases, rendered the virtues of the oil still more efficacious, by adding camphor to it. This discovery is, of course, very valuable, as the fever cured is precisely the same as that which has made such cruel ravages in St. Domingo.

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M. TOMMASI, a Neapolitan chemist of some celebrity, who has been several years at Paris, has lately made many experiments to prove the power of the muriat of soda, or kitchen salt, in destroying the long white worms which are found in the intestinal canal. When he put those worms into a solution of an ounce of salt in fifty ounces of water, they did not live more than twenty-four minutes; but when the same quantity was dissolved in eight ounces of water, they lived only eight minutes. Hence he infers, that the method of curing this malady is easy and effectual.

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Professor PASCHMANN, of St. Petersburg, has invented an anemometer, by which the strength of the wind may be exactly measured; and, by means of other instruments, which are easily adjusted to it, such as a hygrometer, thermometer, and barometer, a variety of physical experiments may be conducted with the greatest convenience.

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A letter from the Honourable FREDERICK NORTH, Governor of Ceylon, to the Right Honourable Lord HOBART, dated Jan. 1, 1804, received by Lord CAMDEN, one of his Majesty's principal Secretaries of State, and communicated by his Lordship to the Royal Jennerian Society, contains the following information.

"Vaccination was unfortunately suspended, in some degree, while the English medical gentlemen attended the army at Kandy; and a spurious virus had been made use of in the northern district, the failures occasioned by which had discredited that beneficial practice. Genuine vaccine matter has, however, been sent thither, and confidence is restored throughout all these settlements, in that mode of inoculation. At Columbo, it is kept up with some difficulty, for want of subjects, as almost all the inhabitants of that neighbourhood have had the small-pox, in some manner or other; and the salutary consequences of the attention of government to that object, appears in the total absence of that disease from the province during the last six months; a circumstance hitherto unknown."

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A Director General of Vaccination has been appointed in the Italian Republic, to superintend all the inoculations of Cow-pock throughout

throughout the Departments, the professional Members of which, are obliged to transmit him an account of their several proceedings.

A Case has occurred in Fullwood's Rents, Holborn, of supposed small-pox after vacciolation; but at a very large meeting of the profession this day, (Sept. 26) it was the general opinion that it was not small-pox. Most of the gentlemen who entertained the first idea, declined appearing; while the few who had considered the eruption as varicella, were confirmed in their conclusion by the observations of those who had not previously seen the case.

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*Theatre, London Hospital.*

MR. HEADINGTON and MR. FRAMPTON, will commence their First Course of Lectures upon Anatomy, Physiology, and the Principles and Operations of Surgery, on Monday, October 1, at two o'clock.

Demonstrations and Dissection as usual, by Mr. ARMIGER.

A series of Lectures upon Surgery, illustrated by Cases under Treatment, will be delivered during the winter by Sir William Blizard, Mr. Thomas Blizard, and Mr. Headington, surgeons of the Hospital.

On the 1st of October, also, Dr. Cooke will commence a course of Lectures upon the Practice of Physic; and Dr. Dennison upon the Theory and Practice of Midwifery.

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Dr. BRADLEY's Lectures on the Practice of Medicine will commence on Friday the 5th of October next, at his house, No. 25, Parliament Street.

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Dr. JOHN REID, senior Physician of the Finsbury Dispensary, intends to deliver, in the present winter, a Course of Lectures on the Theory and Practice of Medicine.

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Mr. THOMAS will commence his Lectures on the Principles and Operations of Surgery, on Monday, October 8, at his house in Leicester Square; where printed particulars may be had, and at the Anatomical Theatre in Windmill-street.

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Mr. MOOR, Surgeon Dentist to her Royal Highness the Duchess of York, will commence a Course of Lectures on the Structure and Diseases of the Teeth, on Monday the 5th of November; in which will be explained, the complete Practice of the Dentist.—Further particulars may be known by applying at his house, No. 6, Palsgrave Place, Temple.

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**TO CORRESPONDENTS.**

The unusual influx of original matter, has obliged us to postpone our Analysis of Books, as well as several valuable Communications.

THE  
Medical and Physical Journal.

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CASE OF POISON FROM A VEGETABLE FUNGUS; *together with Remarks on Professor Rossi's two Cases of SUPPOSED Rabies Canina*; by SAMUEL ARGENT BARDSLEY, M.D. Physician to the Manchester Infirmary.

TO the EDITORS of the MEDICAL and PHYSICAL JOURNAL.

Gentlemen,

I Trust you will consider the following case worthy of insertion in your widely-extended Journal, as it serves to point out one of the many unsuspected and frequently undiscovered causes of some alarming and anomalous disorders, which have perplexed practitioners in their treatment of children. I have no doubt, but great numbers of this class of patients fall a sacrifice to their ignorantly partaking of poisonous vegetables, both in a wild and cultivated state. Young children are prone, from hunger, curiosity, or diversion, to eat all kinds of vegetables which fall in their way; and ought, therefore, to be strictly watched and cautioned against so dangerous a practice. Whenever a healthy child becomes suddenly afflicted with the peculiar symptoms about to be described, it may be readily inferred, that some vegetable poison has been conveyed to the stomach. This supposition will lead to the speedy adoption of those remedies which are best calculated to save the life of the patient.

On the 29th of last month, I was called upon, at six in the evening, to visit Master S. aged five years, the son of a gentleman living at Ardwick, near this town. His parents informed me, that he went out to play in perfect health, after eating a moderate dinner, with a companion of nearly his own age, in the fields adjoining the town;

(No. 69.) C c and

and in about two hours was led home in a state of alarming illness. He seemed to stagger like a person intoxicated, and with odd gesticulations, laboured to express his sufferings, but was unable to articulate a single syllable. When I saw the patient, which was probably about two hours after his first seizure, he appeared partially delirious, and uttered faint and indistinct screams. His pulse was slow, small, and somewhat irregular. The pupils of both eyes were much dilated, and the vision evidently imperfect. He seemed very averse to lying down; and his restlessness and impatience led him to make frequent attempts to walk about the room, but without any fixed object or design. His gait and gestures were those of a person inebriated. He was unable to answer any questions, or to express his feelings by words. Slight convulsive motions might be perceived in the legs and arms, which gradually extended to the muscles of the trunk, and produced irregular distortions of the whole body. The upper extremities began to swell, and assumed a livid colour; and the abdomen felt hard, and rather tumid. From the peculiarity and suddenness of the attack, I was led to conjecture, that the patient had swallowed some poisonous vegetable substance. But the fact could not be ascertained at the time, as his companion was far from being well, and too much alarmed and confused to give any satisfactory information. No time, however, was to be lost. The spine and extremities were rubbed with a volatile linniment (which happened to be at hand) until a warm bath, and stimulating glyster, could be prepared. He was almost *immediately* placed in a bath, of the temperature of 100 degrees, (the warm water being in readiness at a neighbouring dye-house) where he was suffered to remain for the space of ten minutes. On getting into bed, the glyster was administered. Pills, with calomel and extract of jalap, were soon after got down. A profuse sweating came on, which was supported by supplying the patient with lemon-whey, and other warm diluents. In about twenty minutes from the exhibition of the glyster, a copious stool was procured. The patient, who had become more tranquil from his first entrance into the bath, seemed *now* to be greatly relieved. Soon after, a vomiting of an offensive and greenish-coloured fluid supervened; and this operation was followed by a plentiful discharge from the bowels (but nothing could be discovered in either of the evacuations, which might serve to strengthen the supposition of the patient having swallowed any deleterious substance). An evident abatement

abatement of the most untoward symptoms *immediately* succeeded. The dilatation of the pupils had almost disappeared. His pulse became firmer, and was increased from 70 to 90 beats in a minute. The patient was likewise able to articulate with tolerable distinctness; but he seemed like a person just roused from a long and deep sleep, unconscious of any thing that had happened to him. I directed the purging pills to be repeated during the night, until a complete evacuation of the bowels had taken place. The next morning, I found my patient, with the exception of some degree of languor and debility, entirely recovered from this severe attack. Upon strictly questioning him and his companion, it appeared, they had mistaken one of the fungi, a *species* of the *agaric*, for the mushroom; and that my patient had eaten a considerable quantity of this poisonous vegetable, while in the fields. His companion had eaten a smaller portion, and therefore escaped with, comparatively, little injury. If timely assistance had not been administered, this child would, most probably, have fallen a sacrifice to a fatal, and not uncommon mistake, with children of his age. It may not be improper to remark, that if I had been called to this patient at the commencement of this malady, I should have thought it highly expedient to have prescribed *an emetic*; but considering that sufficient time had elapsed, provided any vegetable poison had been introduced into the stomach, to admit of its passage into the bowels, I directed my first efforts to procure a plentiful evacuation by stool.

Permit me, Gentlemen, to subjoin the following observations and comments, which have been suggested by the perusal, (in a late number of your Journal) of Professor Rossi's reports on the efficacy of Galvanism, in two cases of *supposed* rabies canina. The fatal malignity of this disorder, which has hitherto baffled the skill and sagacity of our most eminent practitioners, will, I trust, sufficiently apologize for an attempt to investigate how far these reports may be entitled to confidence and approbation. Rational scepticism, on medical reports, ought to be entertained by every medical person, who feels a due sense of the utility and importance of the healing art; but especially with regard to those statements, in which it has been asserted, that diseases of the most *refractory* and *incurable* kind have yielded to remedies, either before unknown, or revived from the authority of obselete and neglected empirical records. The instances, in which the power of several remedies, in the treatment of formidable diseases, has been

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greatly

greatly exaggerated, are too recent and notorious to require any mention to be made of them here. Hence the necessity of receiving with due caution reports of a similar kind, for a too easy credulity is liable to be converted into obstinate scepticism; and thus the medical art sustains a serious injury. How many valuable remedies have sunk into unmerited neglect, from the injudicious commendations bestowed upon them by over-sanguine and sometimes interested reporters! Unfortunately, an attachment to the marvellous, which possessed the older systematic writers of the continent, when treating on the subject of hydrophobia, seems to have been transmitted *unimpaired* to their medical successors. Even the accurate Morgagni has mistaken totally distinct diseases for the genuine hydrophobia, as his quotations from Marcellus Donatus abundantly prove.* Indeed, if we were to give implicit credit to the reports of modern French and Italian authors, on the cure of hydrophobia, there is no complaint more effectually and readily to be subdued.

But when these statements are cautiously examined, there will appear just grounds for suspicion, that some other diseases have been confounded with canine madness; for an aversion to, and difficulty in, swallowing liquids, are often the concomitants of hysteria, and occasionally are to be met with in tetanus, and other spasmodic diseases; and likewise not unfrequently arise, from the influence of imagination† operated upon by terror, in those persons who have had reason to believe, that they were bitten by a rabid animal. I am afraid these remarks but too justly apply to the supposed cases of hydrophobia, under consideration. From my own observation of three fatal cases of *rabid* hydrophobia, (two of which fell under my immediate care) and from an attentive and diligent inquiry into the nature and history of this disease, I am induced to believe, that Professor Rossi's cases do not belong to those of *genuine* hydrophobia, or canine madness. I shall now proceed to point out the *defective testimony* in the statement of these reports, as well as the *want of accuracy*, in the conclusions drawn from them. It would indeed

* See Miscellaneous Observations on Canine and Spontaneous Hydrophobia (by S. A. Bardsley, M. D.) in the fourth Volume of the Manchester Memoirs.

† See Hamilton on Hydrophobia, and the 4th volume of the Manchester Memoirs.

indeed have been more satisfactory to have perused the original communication; but I must take it for granted, that every material circumstance in the history of these cases, has been transcribed from the author's account. It is of importance, in the first place, to observe, that no proofs are adduced in these reports of the actual madness of the dogs, at the time the patients sustained the injury. Persons, who are bitten by dogs, too readily admit the presumption of the animal's madness, and neglect the proper means to ascertain so important a circumstance. But even if the fact be admitted, it does not necessarily follow, that the infection must take place. For it is notorious, that not one dog in forty, supposed to be mad, is really so affected; and moreover it is a fact, founded on the observation of a great number of instances, that upon the average, not more than one person * out of twenty-five that have been exposed to the bite of dogs unquestionably rabid, has become infected with the disease. It is likewise of consequence to remark, how strongly the first patient laboured under the *impression of terror* from the nature of the accident; and also that he had cauterized himself with boiling oil, and the actual cautery, in order to excite a long suppuration. What degree of inflammation and irritation were excited in the parts thus treated, is not stated; but it is not unreasonable to imagine, it must have been very considerable, and equal to the production of the very acute pain in the patient's neck, from which he was relieved by some internal composing medicines. But another train of symptoms followed, which certainly denote a general derangement of the system: such as, a severe pain in the head, and dizziness, (which were relieved by an emetic.) These were succeeded by violent pains in most of the joints, particularly in those of the neck and back; and, finally, the patient was seized with terror at the sight of water, attended with convulsions of the lower jaw; and it is further stated, that he felt, as the disease advanced, a propensity to bite. With the exception of the hydrophobic symptoms, there does not appear in this description of the disease, any characteristic traits of canine madness. Great stress, indeed, seems to be laid on the *disposition to bite*, as a symptom peculiarly characteristic of the disease: Yet so far is the "*cupiditas mordendi*" (which enters into

* See Dr. Hunter's Paper in the Transactions for improving Medical Knowledge, vol. I. p. 295,

the definition of *hydrophobia rabiosa* of Cullen, and other systematic writers) from being a pathognomonic symptom of canine madness, that it very rarely occurs, and then only at the close of the disease, when the patient, exhausted by watchfulness, impatience, and anxiety, falls into a temporary delirium. That this symptom depends merely on an *association of ideas*, strongly impressed upon the imagination, during the temporary delirium, is clearly proved from the fact of its never occurring in those patients who are ignorant of the nature of their malady; and consequently whose minds are not liable to be impressed with notions of the disease having originated from the bite of a rabid animal. The last victim of this dreadful malady, who fell under my care about ten months ago, died *unconscious of the nature* of his complaint, and never discovered the slightest inclination to *bite*, or imitate any of the actions* of the animal which had caused his sufferings. I have no hesitation, therefore, in ascribing the symptoms, exhibited by Professor Rossi's first patient, to the power of imagination, operating upon a nervous and irritable temperament; and which was greatly assisted by the severe treatment pursued, with a view to excite a long suppuration. That hydrophobia, or a dread of water, has been excited by other causes than the poison of a rabid animal, is too well known to admit of dispute. Medical authors abound with histories of supposed canine madness, which may be referred, with great propriety, to mania, solely excited by anxiety and terror. Indeed, it is always difficult to divest the mind of fear, when a bite has been received from an animal supposed to be mad. The case† of the clergyman, near Manchester, strikingly exemplifies the power of imagination, in producing the symptom of hydrophobia. This gentleman experienced the greatest dread of water, from merely visiting one of his parishioners affected with canine madness: nor was he relieved from this notional hydrophobia, but with great exertion and difficulty. In addition to the conflicts of the mind, it appears that P. Rossi's patient suffered from great local irritation of the body.

Two examples are upon record of persons dying under hydrophobic symptoms, from having wounded their own fingers,

* I may remark here, that the barking of hydrophobic patients, which authors have mentioned, and copied from each other, is merely occasioned by the effort of hawking or coughing up the viscid saliva, which incessantly troubles the patient in this disease.

† See Hamilton on Hydrophobia.

fingers, by biting them in a paroxysm of anger.* May not then the combined influence of bodily and mental irritation be considered as the chief, if not the sole causes of this patient's hydrophobic symptoms?—The truth of the supposition will be further strengthened, when we consider the total absence, in this case, of some of the most characteristic marks of canine madness; such as, the desire of solitude; a copious flow of viscid and ropy saliva; stricture at the throat, with occasional apprehensions of immediate suffocation; restlessness of the body, and a marked aversion to a recumbent posture. Now, all these symptoms, in a greater or lesser degree, invariably accompany every instance of *rabid* hydrophobia.

CASE OF SUDDEN DEATH FROM A MORBID AFFECTION OF THE BRAIN; WITH THE APPEARANCES ON DISSECTION. By JOHN CLARKE, M.D. and THOMAS BRADLEY, M.D. Physicians to the Assylum for Female Orphans.

THE following Case is recorded as one among many, which prove that the brain, though an organ of great importance to the functions of life, admits of very considerable alterations in its structure, and for a great length of time, without the existence of any symptoms which excite the attention of the patient.

A. B. aged 11, an orphan in the Assylum, had enjoyed such good health during the whole time of her residence there, as never to have been admitted as a patient into the Infirmary on any account; and upon inquiry, it does not appear that she had ever made any complaint to any of the other children, of any pain or sickness. On the contrary, on the morning when she was attacked with the disease, of which she died, she had been playing with the other girls, and in very good spirits.

On Thursday, October 4, whilst she was in the school, employed in needle-work, she was suddenly seized with a most violently acute pain in the pit of the stomach, so that she was not able to walk without assistance. She was immediately taken to the Infirmary, (a distance of about sixty yards) and in the space of a very few minutes she expired.

On

* See Mem. de la Soc. Roy de Medicine, Paris, Ann. 1783, Comment & de Boerhav. Aphorism.

On the following morning, October 5, her body was examined, under the direction of Mr. Howard, surgeon to the Institution, and in the presence of the writers of this Report.

The attention was, of course, first directed to the cavity of the abdomen, where she had complained of pain; but on a minute inspection, all the contents of this cavity were found perfectly sound.

The thorax was next subjected to examination, but no disease of any part was found there, both the lungs and heart being quite in a healthy state.

The contents of the skull were then exposed; and the first circumstance which attracted attention was the unusual vascularity of the upper surface of the pia mater, the vessels upon which were much larger than they are usually found. At the anterior part of the brain, the division between the two hemispheres, upon taking off the dura mater, was less perfect than it is commonly found; and at this part, between the tunica arachnoides and pia mater, there appeared a quantity of water, which escaped upon making a small puncture with a scalpel. The substance of the brain did not exhibit any unusual appearance; but upon cutting into the lateral ventricles, there was found a much larger quantity of water than is natural to those cavities, yet not enough to produce any probable effects from pressure, or distention, and there was no extravasation of blood either on the surface of the brain, or in the ventricles.

The brain was then carefully removed, for the purpose of inspecting the under surface. The general appearance was natural; but under the middle lobe of the left side there was a cyst, (which contained more than half an ounce of a transparent fluid) one side of which, to wit, the inferior, was apparently formed by the membranes. The upper was formed by the substance of the brain itself, which at this part was hollowed or indented, and was very white, of the colour of the medullary substance of the brain.

The rest of the brain, and the cerebellum, appeared to be in a healthy state.

There can be very little doubt that the sudden death of the patient may be fairly attributed to this cause. Yet the remarkable circumstance respecting it is, that although the disease must have been of very long standing, as is proved by the absorption or compression of the brain at the inferior part of the middle lobe, where the cyst was formed, yet no symptom indicating any disease of the head had
existed

existed till within a very few minutes before her death; even then, the sensation of pain was referred to the stomach, and not to the head, so that it might perhaps even be doubted by some, whether, although the derangement of the structure of the brain above described was found upon dissection, this was in fact the cause of her death.

We are of opinion, however, that such doubts will be removed, when it is remembered that there is a very close connexion by sympathy between the brain and the stomach, and that diseased affections of the former very commonly produce effects on the latter. The sickness which takes place in apoplexy, in injuries of the brain from fracture, extravasation, &c. are decisive as to this. But perhaps there is no circumstance in which this more strongly appears than in puerperal convulsions, which are most frequently excited by organic affection of the brain as an occasional cause; of the approach of which, violent pain of the stomach is sometimes the only symptom. Why, in this instance, the effect which terminated in the death of the patient was produced at that time, or why some symptoms of the existence of so considerable a diseased alteration of so important a part, had not sooner appeared, we do not undertake to explain; but we take occasion to observe, that a case fell within the knowledge of one of the reporters of this case, in which a woman died of a sudden and unexpected attack of puerperal convulsions; and upon the examination of her body after death, a very considerable suppuration of the plexus choroides appeared, which must necessarily have existed before the attack of the convulsions, yet there had been no symptom indicating the existence of any disease of the brain beforehand.

London, October 10, 1804.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

HAVING on a recent occasion found the saw recommended by Mr. Hey of Leeds peculiarly useful, I beg leave to transmit to you a short statement of the case, and a drawing illustrative of it.

I am, &c.

North Shields, Sept. 7, 1804.

E. M. GREENHOW.

My

My patient is a sailor of about thirty years of age, who from syphilis had an extensive caries of the os frontis.

I shall pass over the medical treatment, as my intention is merely to prove, *in this case*, the superiority of the above instrument over any other we are possessed of.

He became a patient at the Dispensary here in March 1803, at which time it was thought proper to make a perforation with a trephine, to give exit to any pus that might be accumulated between the cranium and dura mater. This was accordingly done by Mr. Burnet, under whose care he then was.

We found, that the bone was completely diseased throughout, and that the dura mater was thickly covered with healthy granulations.

The diseased bone was denuded, at that time, to the extent of five inches in length, and nearly three inches in breadth in one place, by the ulcerative process, and the scalp was detached to a much greater extent. So that it was deemed impossible at that time to remove it.

Finding at length, as his general health improved, that nature was exerting herself to throw off the diseased bone by a gradual dissolution at its connection with the sound part, it was thought right to assist her in her process by removing at least a part of it.

It had occurred to me, that I should find Mr. Hey's saw useful, when it was found proper to remove the bone. I therefore now sawed across from where the perforation had been made by the trephine, to the edge (marked 1st in the plate) and with great ease removed that portion of the bone marked A. I again found the dura mater covered with healthy granulations.

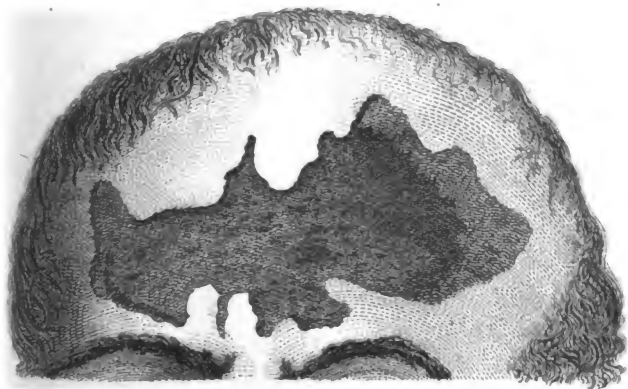
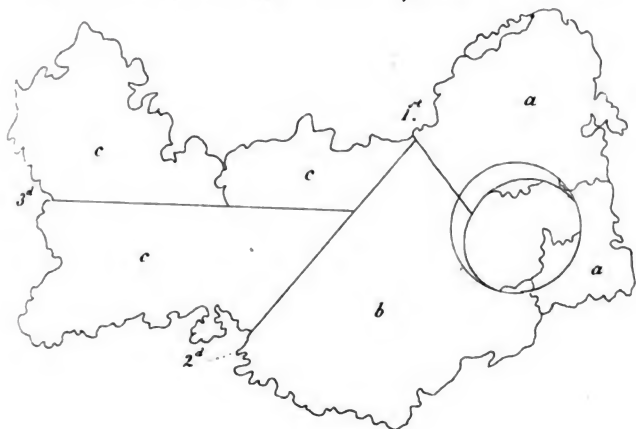
In my second operation, I divided the bone from the edge marked (1st.) to that marked (2d.) and elevated the portion marked B.

In my third operation, I sawed through the remaining bone C. C. C. longitudinally (marked 3d.) and removed the whole of it without using much force.

The dura mater, throughout, was covered with healthy granulations, and the enclosed drawing is a tolerably faithful representation of the appearance of the wound after the removal of the bone.

I found the saw work with great facility, and the operation each time was finished in a few minutes. I think it will be obvious to every one, that had the trephine been used, it would have been laborious and tedious.

The



Printed for Richard Phillips 71 St. Paul's Church Ald. Nov. 1. 1804.

The outline of the bone is faithful, and of the exact size.

I have much pleasure in adding, that my patient is progressively getting well.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

WHEN Dr. Jenner first introduced Vaccine Inoculation, I declined adopting it. Inoculation with the small-pox I had long practised without a single loss; I had also fixed opinions in physiology, which militated against what was advanced by himself and his friends. In process of time, however, such a mass of clear, undisputed, decisive evidence came forward in support of the newly-discovered preservative, as to be irresistible to a mind not hardened beyond the susceptibility of conviction; and, consequently, whatever might have been my previous notions, or my habits of thinking, I could no longer persist in the use of variolus matter.

I will not say, that my own practice, in inoculating with cow-pox matter, has been so considerable as that of many others, or that I have made a variety of experiments, with a view to understand or explain any of the phenomena of the disease; but I will say, that in the small-pox, both natural and inoculated, my experience has been ample; and from that experience alone, I was enabled to compare the merits of small-pox inoculation with those ascribed to the Jennerian practice. From my own experience, then, I can assert, first, that whatever *has been said against the sufficiency of cow-pock matter*, as a security against variolous infection, may be also *said with truth against small-pox matter*, as a similar security. From my own experience I can, secondly, assert, that the subsequent ill effects which *have been said to follow cow-pox*, have, in a ten-fold greater degree, followed small-pox. And lastly, from my own knowledge, I can assert, (and who of long standing in the profession cannot do the same?) that many instances of mortality have happened in small-pox inoculation, whilst amongst *all which has been said*, not a single example appears of death from cow-pox,

In

In behalf of my first assertion, I can recollect numerous facts; but, as I write for the public, and on a most important subject, I will state nothing in support of that assertion, which shall rest solely upon my own credibility or memory; I will, therefore confine myself to the three following cases:—

Mr. John Phillpotts, of this city, well known and esteemed in his profession of the law, was inoculated with the small-pox in his infancy, together with an elder sister, by their father, *with the same matter, at the same time*, and both were nursed by the mother, and two persons accustomed to small-pox, of good judgment, and now living. The young lady had the disease to an alarming virulence; the boy's arm inflamed, he was indisposed, and had four or five eruptions on different parts of his body; and Mrs. Phillpotts says, they appeared to her to go on after the manner of other small-pox pustules. In his twenty-first year, I was desired to visit him as being ill with some eruptive fever. He had spots just appearing in different parts of his body; the next time I saw him, nothing but the positive assertion of himself and his friends, that he had had the small-pox, could have made me doubt that they were variolous. On the following day that doubt was entirely removed. He had a plentiful crop of pustules of the distinct kind, which went regularly through their stages of suppuration and scabbing.

In September 1794, I inoculated a daughter of Mr. John Rudhall, of this city, with matter, which *I had taken myself* from a variolous subject. The child's arm inflamed, she was indisposed, and had a few eruptions, which did not suppurate. About twelve months after, I inoculated her again, and she had then the distinct small-pox, with all its usual circumstances.

Mr. Cooke, an eminent apothecary of this city, desired me to see a patient, who had some years before been inoculated by a practitioner of respectability and experience, for the small-pox, together with ten others, in the Gentleman's own Small Pox House. The patient supposed that he then received and went through the disease, and the inoculator assured him of it. When we visited him, he was then blind with small-pox, which went through its usual stages.

In support of my second assertion, I need not stake my own credibility at all. My experience can only coincide with the testimonies already before the public, of the small-pox rousing up scrophula in all its malignant varieties,

ties, and being followed by phlegmons, ophthalmias, &c. while nothing beyond cutaneous eruptions has, to the best of my recollection, been imputed to the cow-pox.

But as to my third assertion, its truth is so universally known, that all proof is unnecessary.

I shall go then to the inferences to be drawn from what has been premised. From the cases supporting the first assertion, it appears, first, either that some individuals may receive the small-pox infection twice; or, else, that the patient may be infected to a certain degree with varicellous matter, but not so as to make an indelible impression on the constitution. In either case, their inoculation with the small-pox has no advantage, as a protecting security, over the cow-pox. Let it be said, that the practitioner who inoculated the patient supposed to be infected a second time, was, in the first instance, either inattentive or deceived by doubtful appearances; or that the first time his patient was not inoculated with real small-pox matter, or with small-pox matter in a proper state. To the first supposition, it must be answered, that in the general practice of cow-pox inoculation, it is not to be believed that operators will be more sagacious, more discriminating, or more attentive than their predecessors have been in small-pox inoculation; and to the second, that similar errors are just as likely to prevail in vaccine inoculation: So that the conclusion must be, either that there are individuals, in whom the susceptibility of the small-pox is not destroyed by a well-conducted process either of the cow-pox or small-pox inoculation; or that, in the instances, when either the one or the other failed to secure the individual against future small-pox, the process did not go so far as to make the proper impression on the constitution; or lastly, that in the inoculation, improper matter must have been used; *which, however, could not have been the case in the two first examples given above, in proving my first assertion.*

Three instances have been brought forward, amidst the voluminous writings for and against the cow-pox inoculation, where it failed of securing the patient against small-pox; two by Mr. Goldstone, of Portsmouth, and one in the London Papers of the beginning of this month. Whether the patients were inoculated with genuine cow-pox matter or not, I will not inquire; I will admit their weakening our confidence in vaccination to a certain degree. But these three failures, amid the collected experience of the Profession in general, are here met by the experience

experience of a single individual, in a provincial town, with an equal number of cases, equally weakening our confidence in small-pox inoculation. In this respect, then, let the two inoculations be supposed to stand upon equal grounds. But let the *consequences* of one be weighed against those of the other, and the scale of vaccination must incalculably preponderate. In immediate danger to the individual, in remote mischief to his constitution, the cow-pox has infinitely the advantage. To this let us add, that while with *the cow-pox* the practitioner, at the worst, injures no one except his patient, with *the small-pox* he may deal misery and destruction among his neighbours, far beyond the limits of his operating; that in the one he is continually risking the dissemination of a loathsome and mortal disease, while in *the other* he is conducing to the extermination of that pestilence from among mankind. Let us, then, turn to common sense, and ask her, which she would prefer?

I am, &c.

Gloucester, Oct. 6, 1804.

CHARLES BRANDON TRYE,

Senior Surgeon to the County Hospital

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

THE observations which have lately appeared in some of the newspapers on the subject of vaccine inoculation, though calculated to excite doubts and fears among the timid and ignorant, yet must fill the minds of those, who with an attentive and impartial eye have watched the rise and progress of this practice, with the greatest indignation.

There is a set of beings in the world so void of just principle, that they constantly oppose whatever is brought forward for the public good. From the first publication of Dr. Jenner's discovery to the present hour, we have seen them ever on the watch, and ready to catch at any event, which might give the smallest pretext for misleading the public in the pursuit of that grand object, the extermination of the small-pox. The late occurrence in Fullwood's Rents has called up one of these malignant spirits, who with an air of exultation tells us, that two children who had

had been vaccinated some years ago at the Small-pox Hospital, in St. Pancras, are now supposed to be labouring under the small-pox communicated by contagion. Let us admit the fact, and let us admit too, for it must be admitted, that perhaps there is scarcely a street in the metropolis, or a country town in the British realms, where the same kind of disaster which has happened in Fullwood's Rents may not appear. The reason must be obvious to every person who will give himself the trouble of reflecting on the subject. The new practice of inoculation has been by many taken up in a hurry, and set on foot without due attention to the rules given for its management. In short, that it has been practised by those who did not understand it, does not admit of dispute. This was fully explained to the Committee of the House of Commons, whose time was occupied several successive weeks in an investigation of the merits of vaccine inoculation, and who reported to the House, their full conviction of its efficacy.—Do you conceive, Gentlemen, that names so celebrated in medical annals as Cline, Home, Farquhar, Baillie, Ash, Blane, Lettsom, Knight, Denman, Ring, Saunders, and many others of the highest character, would have so solemnly borne testimony before a committee of their country, in favour of vaccination, if they had not been, by previous experiment, positively certain of its importance? Without similar conviction, would distant nations have made presents to Dr. Jenner, and their universities have heaped upon him their diplomatic honors? There are two ways of doing a thing, the right and the wrong. A person may possess the perfect vaccine matter, such as will produce the guardian pustule; but by managing it injudiciously, or from not knowing all the phenomena of the disease, he fails, and produces one thing for another. There are few practitioners of long standing, and of extensive practice as inoculators of the small-pox, who have not witnessed cases of casual infection after they supposed their patients secure by inoculation. A paper of Dr. Jenner's, published in your Journal for August last, seems to throw much light on this obscure subject; and from the circumstance of the two children in Fullwood's Rents being of the same family, there is great reason to believe that they were under the influence of that disease, which he describes as a frequent impediment to taking either the small-pox or the cow-pox properly.

I repeat again, Gentlemen, that we must be prepared for events similar to those which the newspapers have recorded,

corded, while the great work of exterminating that horrid pest the small-pox is going forward. To be convinced that it is going forward, in every part of the world, with a rapidity which its most sanguine promoters could hardly have conceived, we have only to turn our eyes to the continent of Europe and America, and particularly to our settlements in India. That it is not only advancing rapidly but successfully, in many of the largest towns of France, Germany, Italy, Switzerland, &c. &c. we have the most satisfactory proof; and also that the small-pox, which heretofore had committed its destructive ravages among them, is now scarcely known but by name; and while, at home, we are looking upon the Author of this blessing with a cold indifference, he is there the object of enthusiastic regard, and almost idolatrous veneration. In many parts of the world, the Jennerian inoculation was introduced inauspiciously. Prof. Odier of Geneva, began with matter he procured from Vienna, taken from an imperfect pustule. His inoculations were consequently incorrect, and found his patients assailable by the small-pox. But what course did he pursue? Did he, like some of our people at home, decry the practice? No,—he wrote to Dr. Jenner, who furnished him with proper matter and correct instruction, and vaccination went on from that time in so perfect and rapid a manner, that in the large and populous city of Geneva, the small-pox has long since been subdued. For the truth of this statement the reader may refer to German Annals of Medicine or the French. One might go on to any extent, in detailing facts relative to the efficacy of vaccination; but it would be unreasonable to encroach farther on your pages with a subject already so satisfactorily discussed. Yet permit me to make one observation more on the paper in question. That if such writers, instead of indulging their malvolence or prejudice, would exert their understanding, and would give to the subject of vaccine inoculation that share of attention which it deserves, they would at once behold its true and solid importance, and co-operate with those philanthropists whose labors will finally remove one of the greatest impediments which human happiness ever knew.

Oct. 9, 1804.

A LOOKER-ON.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

I CONCEIVE that your very valuable and esteemed Journal must be highly important to the medical world, inasmuch as it affords a ready and easy channel for the conveyance of medical truths and practical observations; a few plain and well authenticated facts being of more real utility in the practice of physic, than whole volumes of theoretical disquisitions; and I consider it an obligation incumbent upon every member of the profession, to contribute, as far as it may lay in his power, towards the promotion of medical science; for in a subject buried under so much obscurity as that of the animal economy, it is not to be wondered at, that the practitioner should be often embarrassed in his prescription, and obliged to regulate his conduct by conjecture or uncertain analogy. Impressed with the importance of this idea, I shall beg leave to state what has been the result of my experience with regard to the operation of a remedy, which, although generally known, does not seem to have had that attention paid to it which its merits appear to me to demand.

I am firmly persuaded, that we have not in the whole *Materia Medica* a more useful or powerful agent than *Nicotiana*, when properly administered, in cases of strangulated hernia, or obstinate constipations of the bowels; as, for the most part, they arise from spasmodic stricture. I do not know a remedy that is equally efficacious, its almost immediate effect being that of inducing a state of general relaxation; a state the most favourable that can possibly be conceived for the relief of such complaints.

The principal objection which I understand to have been raised against its more frequent use, is the alarming state which its operation often induces; but it should be recollected, that the patient's life is in a much more perilous state previous to its exhibition, for it is only to be employed when all the more lenient remedies have failed in producing the desired effect.* I have applied it myself,

* *Nicotiana*, although so valuable a medicine, ought to be employed with great care and discrimination; Mr. Astley Cooper has stated two instances in which it has proved fatal. The late publication of this eminent surgeon on the subject of hernia will be read by every student who has a due regard to his professional improvement.

and have seen it applied, in a variety of cases, and do not know a single instance of its failure. In two cases, which have fallen under my own particular observation, the success of its application will appear to have been of the most decisive nature. The cases, as they appeared in succession, I shall now take the liberty to lay before you.

Mary Brett, a woman of a naturally healthy and vigorous constitution, became a patient of mine, labouring under symptoms of strangulated hernia. Upon examination, I found that she had inguinal hernia on both sides; in that on the left, the intestine was evidently strangulated; she had very severe pain in the part, attended with nausea and vomiting. She had not had any evacuation downwards for three days previously to my seeing her. I attempted to reduce the hernia by the usual mode of practice, such as placing the patient in a supine posture with her knees elevated, and brought nearly in contact, to relax the fascia of the thigh; then applying gradual and moderate pressure to the tumour, but without effect; and, indeed, the operation could not be persevered in, the pain it occasioned was so intolerable that she would not suffer me to persist. I ordered for her the following pills, R. Ext. colocynth. comp. ʒss. calomel pt. gr. xij. opii gr. j. M. fiat pil. vj. cap. ij. omni. 2nd. hora donec alvus respondet. In the intermediate time, oily enemata were directed to be thrown up, and the hot bath to be made use of.

It was in the afternoon that I saw her. I called again on the following morning, to see what effect these remedies had produced, when I found the symptoms rather aggravated than appeased; the pills were retained for about an hour, and then ejected from the stomach; the pain in the tumour continued with unabated violence, attended with a spasmodic constriction of the abdomen; and there was evidently an inversion of the peristaltic motion of the intestine, a quantity of stercoraceous matter being contained in the vessel in which she had discharged the contents of her stomach. Conceiving now that no time was to be lost, I mentioned to her friends the necessity of performing an operation, as the only probable chance of preserving her life; but this they strongly objected to, urging that, at her advanced period of life, little advantage could be derived from an operation; and, indeed, it could not be insisted upon with any degree of confidence on the part of the practitioner, but might rather be considered as the forlorn hope. *Nicotiana* now became the dernier resort, of

of which I ordered a drachm of what is vulgarly called shag tobacco, to be infused in a pint of boiling water, and two-thirds of this infusion to be injected immediately; the remainder in half an hour, if the former should not have had the desired effect. Upon my next visit I was very much surprised to find my patient entirely relieved from her complaint; the enema had operated almost immediately after its application, the hernia was reduced, the pain had subsided, and nothing now remained but to support the patient's strength by cordial and tonic medicines.

Thomas Cause, a young man about twenty-three years of age, by trade a compositor in a printing-office, became a patient of mine for the cure of colica pictonum. His disease was characterized by the following symptoms: violent pain about the umbilical region, extending across to the right hypogastric region; nausea, and vomiting of bilious matter; body costive; pulse full, and rather turgid. In addition to these symptoms he had violent spasmodic contractions about the abdominal cavity; the pain which it gave rise to was so distressing, that he cried out like a woman in labour, and the parts became so sensible to the touch that he could not bear the slightest pressure, not even that of the bed clothes. 3x of blood were taken from him, an emetic was administered, and an aperient mixture directed to be taken, with a view to evacuate the bowels. On my next visit I found that these remedies had not afforded any relief to the patient; the vomiting and pain continued as violent as ever, and no evacuation had been produced by the opening mixture. I now directed an oily enema, with thirty drops of tinct. opii, to be thrown up, and the warm bath to be made use of; I likewise prescribed for him six grains of calomel to be taken immediately. I saw him again on the next day, which was the fourth from the attack, when I found that the bowels continued obstinately constipated, no evacuation having been produced by any of the means made use of; the patient was evidently sinking from the constant action that had been kept up during this time; the spasms were so frequent and distressing, that he could get no rest. I now determined to try the *nicotiana*, in the same proportion as in the before mentioned case, when I am happy to say its effects were equally decisive and beneficial; its operation induced a state bordering upon syncope, and the evacuation which followed was so profuse that it became necessary to check it by opiates, and to support the patient

by nourishing broths and cordial medicines. He continues well, and has not had any unpleasant symptoms since.

(Query) Might not this remedy be employed with good effect in cases of tetanus and trismus, as they depend upon spasmodic contractions of the muscular fibres?

I am, &c.

St. John's Square, Sept. 22, 1804.

MICH. BARTLETT,
Member of the Royal College of Surgeons,
and Apothecary to the Finsbury Dispensary.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

FROM a supposition that the successful treatment of a Case of Leprosy may not be unacceptable to the readers of the Medical Journal, I beg leave to offer to their notice a brief account of the disease, with the remedies employed, and the reflections resulting therefrom.

A boy, the son of a Hampshire farmer, 15 years of age, had for the space of six months previously to his application to me, been subject to violent itching in different parts of his body; and when I saw him, his body and limbs were thickly covered with scales of a scabby scurfy nature, which when removed, the parts underneath exhibited an inflamed surface, of a hue inclining to copper colour. Supposing from the history of the case, as related by his parents, that his disease had been either occasioned, or greatly aggravated, by his mode of living, which it appeared had consisted chiefly of smoke-dried and salted provisions, change of diet was naturally the first indication of cure that presented itself; I therefore desired he might be allowed a sufficient quantity of fresh animal food, fruits, and vegetables, and prescribed a calomel purge, with the following alterative boluses and ointment, R. Calomel ppt. gr. ij. Pulv. antimonialis, gr. ix. Opii. gr. iß. Cons. rosa. q. s. ft. Bol. no. ix. Capt. j. ter de die. R. Hydrarg. muriat. gr. viij. Adipis suilla 5ij. M. ft. Ungt. part afft. applicandum. nocte manequē. By persevering in the use of these remedies, with little variation, for the space of six weeks, the white scurfy scales intirely disappeared, and the subjacent parts began to assume their natural colour; the only thing that now remained to be effected was the cure of several

veral deep fissures in the palms of his hands, which I considered as being truly characteristic of the disease, and frequently a concomitant symptom; but the remedies so eminently useful in curing the other morbid parts, had no power over these fissures; and after trying argent. nitrat. with a variety of other means, I was obliged to have recourse to blistering, which had the wished-for effect, producing such a degree of excitement on the cutis vera, as to enable it to throw off the diseased action that it had been so long accustomed to, and which rendered it necessary to employ stimulating dressings.

This is the only case of leprosy which I have had under my care, except one that occurred during my public services; and the hands were, in this case also, the most difficult to manage, which I think would never have been cured without blistering. From the history of the boy's case, it would appear that unwholesome food was in some measure the remote cause of his complaint; and though the cutis vera is the seat of this disease, and may therefore be considered as partaking more of the nature of a local than general affection, yet such medicines as have a tendency to promote the secretions, and produce alterative effects on the mass of humours, must consequently be acknowledged as useful auxiliaries. The scabrous incrustations, so shocking to the eye of the spectator, and hateful to the patient, I conceive to be occasioned by rubbing and scratching the cuticular excretory vessels, which being wounded, pour out their contents on the surface. If this be the case, it will appear evident, that stimulating applications, or such as allay the itching sensations, and produce those which are diametrically opposite, or painful, must have a good effect, by immediately striking at the root of the evil, and relieving the patient from the disagreeable necessity of using his nails; but in all inveterate cases, when the skin has acquired an unusual degree of thickness, the warm bath will certainly become absolutely requisite; and the Bath waters, so famous for cutaneous diseases, may have a two-fold virtue, by cleansing and softening the skin, as well as stimulating it, thereby enabling the absorbents to carry off that surcharge or redundancy of fluids, which have been collected on the surface. An objection may be made to this mode of procedure, on a supposition that turning the current of humours, which Nature seems to have directed to the skin, may eventually produce complaints more terrific in their consequences; but for my part, I should conceive such an opinion to be merely chimerical; and I mention it because

it appears to me, the only one that can be urged against a practice, which I consider both safe and salutary, when the habit is every day undergoing some change by means of proper regimen. And however specious such reasoning may appear, it can never be advanced as an established theorem, whilst the practice recommended has the broad basis of experience for its foundation.

During my studies at a celebrated medical school, the flour bag was the only application then in vogue for Erysipelas, from an idea that it was dangerous to employ refrigerants; medicines of this class are frequently termed repellents, and it would have been a happy circumstance for many patients, if their medical attendants had not been frightened out of their wits, at the thought of this terrible name *repellent*! The famous Cullen, when treating on Erysipelas, seems to conceive that no other application, save meal or flour, is admissible, except when there is a sense of throbbing in the inflamed part, indicating suppuration; yet I must dissent from such an opinion, though sanctioned by so great a writer, in this instance; for if the refrigerant plan was resorted to in the early stages of the disease, suppuration would rarely happen. The Doctor does not speak in positive terms with respect to the nature of this disease, that is to say, whether it be local or constitutional; yet he says, he never knew a translation of the inflammation from the limbs to other parts; and when it happens that the affection of the face is communicated to the brain, he supposes it to be entirely caused by the spreading of the inflammation. Does not this, at once point out the necessity and propriety of having recourse to refrigerants, without leaving the work entirely to Nature, and trusting to flour as the only local application? My practice, in every case of erysipelas, has been invariably the following, which I shall endeavour to illustrate by annexing a case that occurred to me the other day. I was desired to visit the wife of a labouring man, whom I found with a shocking erysipelatous inflammation in her face; her pulse, full and frequent; in fine, she was in a complete state of pyrexia. I immediately bled her, sent a cathartic with a refrigerant lotion, composed of a weak solution of cerussa acetata, desiring that her face might be kept constantly covered with wet linen rags, and renewed as often, and as cold as possible. By this treatment, her face, in less than 24 hours, was free from inflammation; and her eyes, which before were perfectly closed with the swelling, were now restored to their natural state. Hence it appears how extremely fallacious theories are,

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when unsupported by the unerring guide of experience; and I do not conceive that in 999 cases out of 1000, any of the dreadful consequences would occur, which have so frequently been the concomitants of this disease, when treated agreeably to the dogmas of scholastic instruction.

I am, &c.

Romsey, Hants, Sept. 23, 1804.

RALPH CUMING.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

LOOKING over a vol. of your very interesting Journals the other day, my attention was arrested by a paper on the Ophthalmia of hot climates, by a gentleman signing himself D. Whyte, M. D. whom I take to have been Surgeon, or Mate, to one of the men of war then lying in Aboukir Bay. I think it is contained in No. 37, dated March, 1802. He there very gravely informs his readers, that nature has most providentially supplied the eyes with eyelids for their protection, and with tears for the purpose of moistening them. He attributes inflammation of the eyes generally to "expansion of the humours and dilatation of the vessels from the intense heat and vivid rays of the sun, and accounts for the imperfect vision accompanying this species of inflammation, (in which species, however, he says the inflammation is not at all perceptible) from the alteration of the medium through which the rays of light pass. He instances a case of an acquaintance of his, who fell asleep on the rock of Gibraltar, with his eyes wide open, who recovered, notwithstanding, without the aid of a surgeon. The Doctor laments that this person had not put himself under his care, that he might have had an opportunity of assisting nature, by frequent applications of astringent lotions, and by *tapping the aqueous humour*, and reducing its expanded bulk to the standard quantity, sufficient to collect the rays of light into a focus on the retina. Being no doubt a skilful operator, he entertains no apprehension of suffering more to escape than might be necessary; but it does not seem to occur to him, that when, by the use of his styptic lotions, the tunics, with their contents, were reduced to their natural bulk and capacity, the por-

tion he had drawn off would be wanting to direct the condensed rays to their usual focus.

This affection of the eyes, or, according to Dr. Whyte's definition, this "imperceptible" kind of inflammation, is nothing more than what every body experiences, in a lesser degree, in coming from a very light room into a dark apartment. The organ of vision, accustomed to the continued glare of the sun during the day, is not acted upon by the faint light of the night, and requires no other treatment than that the patient remain in a darkened apartment for a couple of days, when the functions of the eye are perfectly restored. Soldiers and sailors, who are much exposed during the day, are very subject to this inconvenience, on their first arrival in a hot climate; but I have never heard it complained of by troops, who had been resident there for any length of time; nor are the negroes at all subject to it, though they are exposed with their heads uncovered all day long at their field labour.

The next species the Doctor takes notice of is, "when the vessels of the tunica albuginea have alone suffered," means no doubt a real inflammation of the external tunics of the eye. He places his chief dependance on astringent lotions and styptic tinctures, applied with a hair pencil to the eyes, and, according to circumstances, leeching, opening the veins, arteries, &c. which, no doubt, the use of his astringents and styptics would, in most cases of active inflammation, produce a necessity for. He does not here approve of scarification; but in the next page he is so much an advocate for it, that he condemns the French physicians for not adopting it, and presumes to suppose that they know nothing at all about ocular inflammation. He takes occasion in this place to suppose, that could his tonics and astringents be applied to internal inflammations, a universal panacea might be discovered! Now I do not see what might prevent the doctor from confirming this ingenious theory, by injecting into an inflamed bladder some corrosive sublimate, dissolved in ardent spirit, or any of his stimulating tinctures. Or, in case of gastritis or enteritis occurring in the course of his practice, he might drench his patients with similar draughts. I do not by any means agree with the Doctor, that those inflammations are produced by heat and light alone, for in the hottest situations, where the temperature of the day and night is uniform, they are not found to be frequent; but prevail chiefly in places that experience a considerable difference in this particular. That this is the case on board ships lying in harbour, in tropical climates,

climates, is well known; and I am told that the climate of Egypt is remarked for the difference of temperature between the days and nights. The reflection of heat and light from whitened squares and streets, or from light sandy beaches, is no doubt a considerable cause of ocular inflammation. My personal, as well as general practical experience, leads me entirely to differ from the Doctor, and substitute mild, cooling, subacid applications, such as the pulp of fruits, or scraped potatoe, to his tonics and stimulants, during the inflammatory stage; when that is passed, a mild astringent wash, much diluted, may perhaps be used with advantage; I have found cold water most beneficial. The eyes must be protected from the breeze, as well as from intense heat and light, for a considerable time after the cure.

I am, &c.

Tullamore, Ireland, Aug. 13, 1804.

PETER HAWKER.

P. S. In your number for May, 1802, I find some cases of a disease by Mr. Chevalier, which he denominates *carrhus suffocativus*, or *coryza trachealis*. In relating the history of those cases, it is singular that he does not take the smallest notice of the state of the trachea until after death, though he dwells on the state of the head and thorax, particularly as he found in each case, after dissection, that the trachea had been inflamed, and had indeed been the sole seat of the disease. A case of this kind occurred to me about four years since. An old gentleman, whose constitution was much debilitated, from a life spent in every kind of excess, complained to me one morning of a sore throat, attended with considerable pain. On examination, I found the glands and fauces somewhat inflamed; I prescribed some opening medicine, and the steam of hot water and vinegar to be inhaled twice or thrice in the day. About two o'clock the next morning I was sent for, and found him sitting up in his bed, unable to lie down from pain and difficulty of breathing, and looking exceedingly wild and alarmed. He was unable to speak, and his respiration was so sonorous that it might be heard at the hall door. I ordered some blood to be taken from him, and a blister to be applied to his throat; but it was too late, he died in half an hour. Had I seen this gentleman in the evening, and discovered the affection of his trachea, which was so obvious the next morning, a blister would in all probability have saved his life,

To

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

THE well-known axiom, that "prevention of disease is better than cure," cannot be more forcibly illustrated, than in the melancholy, horrible affection, which is the object of concern in the present paper.

The great importance of the subject of glandular obstruction and consequent disease, will ensure me the attention of every chirurgical artist, particularly at this period, when the laudable spirit of scrutinizing enquiry and ardent research so perseveringly exerts its never-ceasing efforts for the public good. The very name of cancer carries along with it the ultimatum of misery; nor does the dread it always inspires, fail to contribute largely and rapidly to its production; accelerates its increase and mortal termination. To lessen this dread, to calm the agony of anticipated suffering, and to afford a reasonable hope that such evils may frequently be altogether prevented, are objects of interesting magnitude.

The conduct of young men attending public hospitals, and surgical lectures, confirms the opinion that, unhappily, it has too often been deemed more honourable to the surgeon to perform some of the greater operations of his art with a certain dexterity and dispatch, and thereby remove some loathsome and extensive disease, than to possess abilities capable of superseding the necessity of so frequently operating at all, and by the aid of medical surgery preventing altogether the progressive advances of diseases to that point which renders an operation the *unicum remedium*; but in my humble opinion, there can be no just comparison made between the two practitioners who take these opposite routs, to acquire laudable fame and honorable repute. The man who is capable, from his acquaintance with the resources of Nature, from his sagacity and patient attention, to save the carious leg of a fellow-creature from amputation, and cure it, most certainly ought to rank higher in the scale of merit, than he whose acme of ability consists in a quick and dextrous mode of depriving the sufferer of his diseased limb.

Much has been written, and much said on this great subject, by able persons; still it is certain, that operations are yet oftener boldly and needlessly performed, than timidly and injuriously avoided. From which of these
sources

sources mankind have endured most mischief, I shall not attempt to decide; it is sufficient for my present purpose to observe, that it appears to have become quite fashionable, immediately to remove every indurated gland from every part of the body, almost wherever situated, great or small, easy or painful, of long or short duration, in every period of life, in all constitutions; in short, under all or whatever circumstances. No sooner does an unfortunate female (particularly) perceive that she has a lump, as it is called, in her breast, or elsewhere, which was never before recognised, than instantaneously the trumpet of alarm is sounded; terror follows close, and too often brings in its train that positive evil, which, but for sudden and often unfounded suspicion, might have never happened, or at least with ease have been avoided. I am not clearly convinced but that sometimes the conduct of surgeons (especially those who, on all occasions, manifest a strong predilection for the knife) has greatly contributed to produce this mischievous state of matters, by hastily pronouncing almost every enlarged or hardened gland as likely one day or other to produce cancer; and that such gland cannot too speedily be removed.

Now, in order fully to justify this prognosis, and such a mode of doing business, it appears to me necessary that such practitioners should, in the first place, always be able to say exactly what swelling of this description is scirrhus, and may ultimately become cancerous. Secondly, for the satisfaction of his own feelings, and the welfare of his patient, to afford indubitable evidences that his opinion is founded in truth. Unless these rules can always be fulfilled, it has long seemed to me unjustifiable practice to be so hasty in removing parts which might either never be mischievous, or be restored to healthy action by gentle means; many instances have occurred to me, and doubtless a greater number to many of my brethren, where surgeons of considerable ability have pronounced, that nothing but cutting out a tumour could prevent a cancer, when such tumour has afterwards disappeared either from no medical or surgical treatment whatever, from the incantations of some mumbling old Sybil, or the nostrums of some pompous empiric. Whenever this happens, the result does not yield a very grateful feeling to the professional man. Some years ago I removed several enlarged glands from different parts of the body, for persons whose minds had become so terribly irritated, that nothing short of instant extirpation could appease their fears. I am now well assured that most
of

of these ought never to have been removed at all, that is to say, by the scalpel. Of late years many cases have I seen of a similar complexion, that have undergone condemnation, relieved and cured by a steady perseverance in the use of appropriate means, when the mind could be brought to rely on such means with that confidence which so powerfully tends to promote the salutary object in view. But after what has been advanced on this side the question, let it not be imagined for an instant, that I mean to assert any thing which shall in the remotest degree tend to induce a false security in the minds of those who are so unfortunate as to labour under a scirrhusity in any part of the body, or prevent the timely use of the knife when it is absolutely necessary; still I contend, that the longer persons thus affected are kept ignorant of the true nature of their disease, (and it is equally the case with regard to many other affections) the greater is the chance of affording them solid assistance by suitable means.

Can it, I would ask, be supposed for a moment, that one of the tumours which are said to be removed without cutting, by the numerous pretenders which infest our country, was really a scirrhus gland or congeries of glands, and which would one day form legitimate cancer? On the contrary, we may truly affirm, that their subsidence was an incontrovertible proof of their not being scirrhus, and of course that they never would have been cancerous; it follows then, that more attention ought to be given to decide the great question, what enlarged gland is reducible to health again, and what is not. I do not hesitate to aver, that it is not every one which is very hard, considerably enlarged, somewhat knotty, or unequally surfaced, and even of some considerable standing, which ought, nolens volens, to be cut out, unless other circumstances correspond to determine, and clearly justify such a *modus curandi*. But we need not approach so near the precipice of danger; almost every man conversant in practice, is able to satisfy himself if he chooses, that numbers of hard, indolent, easy, unattached, glandular tumours, hastily designed for removal by the knife or caustic, may by other means be gently and safely dispersed, and diseased action finally removed. In short, means may be used to cause the system effectually to do that in an early, quiet, easy stage of the obstruction, which it in vain attempts to bring about when the tumour is become farther advanced, uneasy, or, perhaps, in the first stage of inflammation.

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I am not unaware of the difference of opinion existing between deservedly great men on this subject, and perhaps the scale may turn against me in the present state of practice; but, on the other hand, it would savour of the worst species of slavery for any man, honoured by a share of public confidence in the medical profession, to hesitate a moment in avowing a difference of opinion from those sanctioned by the greatest of names, where truth will bear him out.

We have no certain, indisputable, decided mode of judging what is always absolute scirrhus, irresolvable by any known means; but we take it for granted that all enlarged, hard glands that are resolved were not primarily scirrhus, or ever would be ultimately cancerous; perhaps this conclusion has been somewhat too hastily formed; the powers of medicine over the worst diseases, in their infancy, are very great, which in a more advanced stage would be little or even none at all. A catalogue of chronic distempers might readily be found to prove this, where the first links in the now short chain might by judicious treatment have been straitened, and health re-established, which, where their number, strength and tortuosity is increased, are only hastened onwards to swell the catalogue of opprobriae medicinae.

It has been urged with much apparent force of reasoning, that it is better twenty, forty, or indeed any number of hard tumefied glands should be removed, than one remain, which would sometime become open cancer. This argument demands examination. Is the person who has undergone an operation of this kind wholly freed thereby from all future apprehensions? Do they not often argue, and that not irrationally, that what has once happened in this particular respect may happen again? Is the perpetual dread of apprehension much less prevalent in the mind, that some other glandular part may become affected, and require an operation, than that the first swelling may ultimately find no other means of relief than the knife?

The constant anxiety in the one situation cannot be less mischievous than in the other, setting aside the high probability, that out of these twenty, forty, or any indefinite number of cases, two-thirds may not be of the nature of those which, if left alone by the scalpel, will never fail to become finally cancerous; ought not every person afflicted with glandular obstructions, of whatever nature, to be at their first discovery encouraged to hope, they may be dispersed

persed by timely and steady recourse to powerful, general, and local remedies? Should success follow, will any man seriously tell me that the mental feelings of the patient will not be in a far happier (of consequence healthier) state than after endurance of a painful and dreaded operation?

It will certainly be a more satisfactory issue of the business, that the affection was removed by the action of general and local remedies on the system, than by the partial action of the knife, existing afterwards in constant fear of some other part requiring a like treatment; infinitely superior to this is the consideration, that if removed by the proposed means, we may safely assure the afflicted they have not had a scirrhus at all. Contrast this truth with the effect of instantaneous, unhesitating removal of every glandular enlargement that comes under the cognizance of modern practice, under the idea that, if left unremoved, it may some day conduct the owner to an untimely sepulchre. Or, suppose this sentence, which I fear is too common, to be passed on some helpless victim of terror by a practitioner of celebrity; and fear operating too powerfully to permit his advice to be taken, such a person applies to some empirical professed cancer-curer, at a distance from home; a combination of causes produce the effect of resolution on the swelling; they return without it. Is not the credit of the art concerned in this result, which has often happened, and indeed does happen almost daily, from rash unjustifiable haste in ascertaining the just nature of the ailment, the constitution, habits, &c. of the patient? How such an event accords with the feelings of the medical artist, it is needless to discuss.

How often does latent venereal taint produce glandular obstructions amongst its multifarious Protæan shapes? Do not temperate surgeons pause in their examinations of doubtful cases, before they recommend the extirpation? Generally I hope they do. That they do not always, I am well convinced from having seen foul obstinate ulcers succeed the removal of tumors which have been cured by the appropriate remedy, after resisting all the other means very considerable ability could suggest. Could this have happened had medicine been preferred to the knife? Has hasty judgment never removed a chronic abscess for a scirrhus tumour? Or, has lurking scrophula never led to error and disappointment?

In short, it is not saying too much to aver our scanty means of acquiring the true definite criteria of legitimate scirrhus;

scirrhus; how necessary then is it to be always guarded in deciding on so important a matter, seeing the most sagacious have been deceived. To discriminate, it is right to pause, and consider the business in every possible view, and all its bearings, before we decide.

I am aware that dwelling on these observations is only reiterating truths, which are daily enforced in our medical schools; yet, as they have seemed of late to be thrown somewhat into the back ground, it is clear no apology is necessary. Some who may perchance read these sentiments, prepossessed with opinions diametrically opposite, boldly adhering to the maxim, that it is better practice to remove twenty doubtful swellings than one malignant one should escape; to all such let it be observed, that it is incumbent on them to save all who consult them as much anxiety of mind and pain of body as they can, and that whilst they steer clear of Scylla, to beware they do not fall into Charybdis. The cutting out an inoffensive swelled gland (comparatively speaking) must always be an operation of considerable importance to the sufferer, whatever may be its situation, or the degree of pain inflicted, inasmuch as it involves in it great previous anxiety, and, most certain, future doubts of its proving a complete preventive of the return of similar affection. I presume no man will take upon him confidently to assure a patient that the taking from him one enlarged indurated gland, will secure him from ever having another; whereas, if this induration and swelling can be removed by general and local powers, the mind becomes at once disembarassed of every idea of cancer, near or remote; the disease was not scirrhus, it never could be cancer. It will doubtless be observed, that this proposal embraces a serious loss of time to the patient, and a trifling with his health and feelings, if at last recourse must be had to the knife. I acknowledge this would be an invincible argument against internal medicines, local remedies, and delay, were it not more specious than true; it is well known from every day's practice, that tumours may remain (in the breast for example) through the major part of a long life, without pain or disturbance; not that I wish to be understood as an advocate for the practice of letting such tumours alone, because I am well convinced, that long residence in the state before mentioned, is one principal cause of their ultimate mischief and danger; the sooner it is known what is their real nature the better. To acquire this knowledge, it is by no means necessary they should be removed, because the operations
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of nature are commonly regular and consistent, and therefore no quiescent tumour ever does so suddenly become cancerously painful, and assume the decided unequivocal form of occult cancer without sufficient warning; that there is a principle of repugnant hesitation in the human system against admitting and propagating morbid poison or diseased action, is very manifest, and has been treated of by men of eminence; it follows, therefore, from very fair premises, that upon any tumour manifesting indubitable proofs of its irresoluble texture, or creating that kind of uneasiness which is well known as the forerunner of greater evil, it is, to use an homely phrase, all in good time to remove it. But it may well be asked, does it not happen that this point of time proves, on some occasions, too late, cancerous diathesis has taken possession of the system, and, although you have removed the focus of mischief, its radii have made sure of the destruction of the miserable wretch who has trusted his life in your unskilful hands? Such an event is most certainly and securely prevented by not waiting for its commencement; for if inflammation, the necessary precursor of absorption, has not commenced, (and without pain of a peculiar well marked and well understood kind, it cannot commence) there can be no doubt but the operation will succeed as well now as it ever would.

I repeat, then, here is a tumour of some considerable standing in the breast, originating with or without assignable cause; I endeavour to explore the causes, and having a tolerable good constitution to deal with, I commence a certain mode of removing this tumour, which, in all apparently similar cases, has been successful; but here, after a reasonable length of time has elapsed, no advances towards resolution are perceived: I am now justified in removing it by the knife; having done my duty in attempting to cure that without a painful operation, which can now be as safely and securely removed by its performance as though no such attempt had been made. Should success follow in only an equal number of cases, I conceive it will be readily allowed that benefit has been derived from delay, and the adoption of general and local remedies. I trust it will be remembered through the whole of this attempted reasoning, that the cure of cancer, without cutting, is not the great design of the business; but that it is merely an endeavour to prevent the rash removal by the knife of a great number of tumours from various parts of the body, under the idea that they will assuredly some-
time

time become cancerous, and which are by many surgeons no sooner seen than condemned, sufficient pains not being always taken to ascertain their true nature; the person afflicted is immediately alarmed, and if they do not speedily yield consent to an operation, which may be unnecessary, their misery is certain, and in exact proportion to the opinion entertained of the abilities of their surgeon. On the other hand, if they do consent, the operation itself, the rules enjoined for future regimen, and mode of life, and the dread of sooner or later having to endure the same scene, form a combination of circumstances sufficiently calculated to embitter future existence, and all this in a majority of cases on no just foundation. Is such a situation to be compared with that of a sufferer under a hard glandular tumour, having it gradually removed, and healthy action restored therein? Such a result is not confined in its beneficial effects to success in the first instance, but extends to a well grounded confidence that the same means will always produce like effects in any similar situation. Are surgeons always justified in removing every swelled gland? Is it perfectly clear that such gland can be spared, without injury to the constitution, without laying the foundation of more mischief than its removal is intended to prevent; and although no immediate evil consequences may seem to arise to the system from the loss of so important a part, yet, will any one assure himself that the economy of nature is not thus primarily much deranged, and may ultimately experience great inconvenience from such a deprivation? On the whole, I infer then, that it is more beneficial to sufferers in this way, that all glandular swellings, where application for advice is adopted sufficiently early, be considered as having an highly probable chance of removal without manual operation, the very hope of such an event being calculated to produce its ratification; but if this desirable result do not follow, another, little less advantageous, will, viz. it will then be known to a certainty, whether the disease be scirrhus or not. It may be syphilitic, scrophulous, chronic abscess, or simple obstruction from some now-forgotten bruise or pressure. This knowledge once acquired, is every thing; could it be earlier acquired, it would be still more valuable; but this being so often impracticable, humanity enjoins the institution of the experiment; nor can it with truth and justice be said, that the adoption of this plan will prove a serious waste of time, a tedious procrastination of what must be done at last, a corroding suspense;

for, should it fail in one point, its success is sure and determinate in another, both surgeon and patient will be no longer strangers to the nature of the affection the one has to combat, and the other endure; nor will injury to the system be sustained, not one valuable moment having been lost. As to all the good that the knife can be expected to produce, we have as much now in our power as ever we had, with a great increase of satisfaction in the use of the instrument, arising from consciousness of having done all that human ability at present affords, to prevent this dernier resort, which is certainly the greatest glory, on all occasions, a good surgeon can acquire.

To conclude, it ought to be the first wish of every practitioner, that the disease be always duly and clearly characterized, before a word be mentioned of an operation. Let it be a standing established rule, that every surgeon be enabled to say, this tumour is scirrhus, and may become cancerous; it must be removed. Were this the law of conduct, the standing practical rule, I am well convinced that numbers which now are, and in future may be, condemned to the scalpel, will never be attempted to be removed thereby at all. On the other hand, all which ought to be operated upon, would, in good time, undergo the now necessary cure.

I am, &c.

Chester, Sept. 24, 1804.

GEO. N. HILL.

P. S. I think the foundation of cancerous mammæ has often been laid at the period of weaning infants. The obstruction consequent on this situation is not removed with that scrupulous attention which it ought; the rule should be, that of never remitting the application of suitable means of resolution, until the breast resumes the situation it was in previous to its distention with milk. Some mothers always dry up one breast, either from a sunk or a flat nipple, or one prone to excoriate. This conduct has led to the production of cancer on the ceasing to bear children, or at the departure of the catamenia; to which I am certain of being right when I add, this horrible disease has often resulted from females refusing to perform the most endearing and natural office peculiar to their sex. How much then is it the duty of the humane and attentive practitioner, never to omit an opportunity of using every effort to *prevent* what he is so often doomed to regret he cannot cure!

ON THE PROGRESS OF MEDICINE; *communicated by*
DAVID UWINS, M. D. *Somers Place, St. Pancras.*

“ Vis consili expers mole ruit suâ.”

THE rapid progress which science has made within the few past years has exceeded calculation; a disposition to the acquisition of knowledge has pervaded every class and all ranks of society. Every one, in the present day, who is not entirely devoted to sensual gratification, or totally destitute of what alone gives dignity to the human character, and marks the superiority of man; every one is stimulated by the ardour of enquiry, and impelled to the cultivation of his intellectual powers. Philosophy is no longer concealed by the walls of a college, or its advantages and pleasures enjoyed by a chosen few; but, deprived of its former severity, and stripped of its imposing garb, it at length stands revealed to public view; its benign influence is generally experienced, and universally acknowledged.

While, however, we indulge the pleasure arising from the consciousness of the rapid advancement of general science, we cannot but regret that the science of medicine in its progress is comparatively tardy, and that its advancement is by no means proportionate to that of other branches of knowledge. A general enquiry, therefore, into the cause of this, may not, perhaps, prove entirely nugatory.

That that department of knowledge, compared to which, did it accomplish its object, all other sciences were vain and futile, and which must ever be considered as the noblest pursuit which can engage the mind or exercise the talents of man; that a science so grand in its nature and important in its design, should continue almost stationary, while others of less utility and inferior value are found to advance with astonishing rapidity, must occasion surprise and awaken enquiry.

It cannot be denied that the progress of the medical in common with that of all other sciences, has been considerably retarded by the general obstructions to liberal pursuits, superstition, and credulity; but now that the

veil of mystery is removed, that the reasoning faculty is exercised more than the senses and imagination, that an universal disposition to impartial enquiry has obtained, it appears that some cause, operating peculiarly to the retardment of this department of knowledge, must be suspected and sought for: and it is, in my opinion, not to be attributed to the undemonstrable nature of the science itself, but to the mode of instruction which is still adopted in the schools and by the professors of medicine.

While in every other branch of education the inductive method of reasoning and instruction has so generally obtained, and in which, hypotheses are always timidly advanced, and published rather as casual suggestions than doctrines requiring belief and attention, Professors being fully aware that those principles alone deserve the appellation of science which stand on the firm basis of facts and experiment;—in medicine, on the contrary, “the *high a priori* road” is still pursued; and, as if conscious of a deficiency in true knowledge, our instructions in this department of education, at least the generality of them, amuse the fancy and exercise the imagination by the promulgation of doctrines, and the formation of systems, for which they have not the authority of either nature or experience.

Professors of the healing art appear to indulge a species of self-deception; and conscious at the same time of the importance of their science, and its imperfect state, so far as demonstrative evidence is required, they endeavour to remedy this imperfection by the substitution of splendid and fanciful hypotheses, by generalizing without facts, and drawing conclusions without data.

Why this disposition to illegitimate generalization should continue in medicine, while it is expunged from other branches of philosophy, I must confess myself at a loss to explain, unless it arise, as I have above hinted, from a consciousness of paucity of real and useful information.

Such vanity and determination, at all events, to support the dignity and splendour of our science, were, perhaps, in some measure excusable, and would not so loudly call for deprecation and censure, were it not positively, as well as negatively, injurious to the interests of society, and greatly obstructive to the advancement of the art: for while dogmas are substituted for facts, and systems for science, our progress in improvement must necessarily be slow.

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Let us then no longer deceive ourselves;—let us cease fondly to imagine, that while engaging in endless disputations about unknown principles and imaginary qualities, we can be in a state of progressive improvement, or add to the stock of useful knowledge.

The logical positions and metaphysical discussions of the antient schoolmen, are now only mentioned to excite a smile. Reason has at length assumed her empire over the mind of man, and has conducted him to the direct and only safe road of experimental enquiry: Let us then, where it is most required, follow her steps, and be guided by her dictates; extricate ourselves from the trammels of imaginary knowledge, and maintain the dignity of the science of medicine by other than artificial methods. Then, and not till then, will our exertions be crowned by abundant success; then will scepticism be banished from physic, and we shall be enabled, on proper grounds, to assert our claim to public attention and regard.

I shall endeavour to pursue this subject in a future letter, if the Editors of the Medical and Physical Journal do me the honour of publishing the present; till then,

I am, &c.

August 21, 1804.

DAVID UWINS, M.D.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

THE importance of the present subject, as well as its dignity, impresses an anxious solicitude in the breast of every British Soldier, and exacts a due reverence to the object of universal adoration. No doubt can be entertained, that the statement of the particulars of the mortal wound which caused the death of the gallant Abercrombie would be received throughout the medical department of the army with every demonstration of an additional advantage to science, while the community at large would treasure every document as the invaluable memento of an unparalleled display of valour and philosophic resignation when in the bosom of victory, undaunted at the approach of impending dissolution.

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The observations of the *real* (vox et præterea nihil) Campaigner have neither the shape of an answer to those of the old Campaigner, nor have they afforded the smallest elucidation to the subject so expressly inquired for.

In my perusal of the old Campaigner's observations, I find nothing like the expression of "wonder that the old General should have fallen a victim, &c." and I think, that if it was possible for the old Campaigner to wonder at all at the dispensations of Providence, the *wonder* would arise from his conviction of the wide disparity in the functions and abilities of *two* individuals, wherein the most worthy and efficient was allotted as the victim.

The *real* Campaigner has very unguardedly thrown an imputation, not of the happiest kind, upon the high professional character of the Field-Inspector, as also upon Mr. Gilham himself. He states, that the Field Inspector did not arrive until after Mr. Gilham had commenced the operation for extracting the ball, and that he then differed in opinion from Mr. Gilham; in consequence, "the General was taken to the Fleet, when he died, &c." It is asserted, that Mr. Gilham had so far proceeded in the operation as to feel the ball very distinctly; if so, why was the operation for extracting it deferred? or, on such an occasion, does it not appear even criminal to delay in the least such a necessary proceeding? What motive could induce any difference in opinion when the ball was distinctly felt by the tactus eruditus of Mr. Gilham; or, what obstacle presented itself, which impeded the progress of the operation, remains yet for further explanation.

I wish further to observe, that as Mr. Gilham so distinctly felt the ball, the incision must have been very extensive; and as the vessels of the limb are very great and numerous, and their situation or vicinity to the neck of the thigh-bone, in which it is said the ball was found after death, requiring much circumspection and dexterity in the operation, it is certainly of great importance to know, what vessels were divided by incision, what parts were wounded, lacerated, or contused, by the entrance of the ball, the quantity of blood lost and effused, and many other important particulars, which I trust will be given to the public. If Mr. Gilham supposes that the medical department of the Army, and more particularly the Staff on the expedition, are so disinterested concerning the history of the case alluded to, as he imagines the public to be; I beg leave to inform him, through the medium of
your

your Journal, that a contrary disposition exists throughout, and that the particulars, as well as the removal of the imputation upon professional characters, will meet the approbation of, Your's, &c.

St. James's Street, Sept. 12, 1804.

PHILOMILES.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

THE investigation of circumstances the most interesting to humanity, of manifest importance to science, and grateful to the enquiring mind, although arduous the attempt and difficult the accomplishment, should be essayed with a philosophic composure and a strength of intellectual stability, incompatible with the faculties of derision or puerile frivolity.

What subject, at this critical epoch, can appear more important for the welfare of individuals, or solicits more the contemplation of humanity and the exertion of skill, than that object which has given rise to the zealous inquiry of the Old Campaigner? Whoever he is, my tribute of approbation, not only for his efforts, which have as yet proved compleatly unsuccessful, but for his spirited and forcible address on the important occasion, in your Journal of August. With every expectation that the medical department of the army of Egypt, of which magna pars fui, will yet receive a faithful history of the death-wound of Sir R. Abercrombie.

I am, &c.

Edinburgh, Sept. 11, 1804.

MEDICUS.

LETTER IV.

OF QUACKS AND EMPIRICISM.

IT may appear a matter of surprize to some of your readers, that Germany should furnish so large a contingency of doctors, to improve the constitutions of the English; whilst it may be admitted, that the Continent does not afford more prolific sources of impudence than our home manufactories; but the phenomenon will not appear wonderful when it is considered, that no empiric is allowed to exhibit a single nostrum in Germany, which,

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of course, encourages a greater importation into this country, in which luxury and money are abundant, and consequently enervated constitutions, with an increased avidity to procure their restoration, become prominent features of a luxurious nation.

The state physicians in Vienna act with a dignity and decision unknown here; and where the sovereign head of the empire co-operates with them, in preventing the mischiefs resulting from empiricism, whilst this country opens a ready market for medical fraud, which at the same time is sanctioned by persons in power, for the sake of the revenue arising from patents, an object of higher estimation than the health of the community. In the distinguished period of the late Baron Van Swieten, empiricism never reared its fascinating and destroying head; and my honoured friend, Baron Quarin, told me, that it never would be tolerated; even Mesmer, who made some slight attempts to practice his deceptions in Vienna, escaped by an hasty flight the restraint of a prison; he found, however, an asylum among the cognoscenti and devotees in Paris, where he made more dupes as well as more money, than was effected by his pupil Demanaduke, by Perkins the American, Benamore the Algerine in London, and others who have varied the mode of magnetism; but whose metallic tractors and operations uniformly possess a polarity of attraction to the metallic substances in English pockets. I shall, however, at present dismiss this immense phalanx of Adventurers, who indeed possess a species of character too interesting to be allowed to sink into oblivion, and are truly worthy of being recorded in the annals of empiricism. At the same time I confess, it is not decorous to mention these in the page that contains the names of the illustrious Van Swieten, Quarin, and Ingenhouthz. The amiable and philosophic Ingenhouthz, now I believe deceased, told me, what no other physician ever could say, that he had under his medical care at one time *thirteen* imperial patients; and Quarin, who directs the first hospital in the world, with a spirit becoming his high character, as the physician and friend of the late Emperor Joseph, said to him in his last illness, "Sire, in twenty-four hours your subjects will lose the best of Princes." Let it be recorded to the glory of Joseph, that he immediately gave Quarin a title of nobility and a pension of about £.2000 a year, as a reward of his integrity and merit.

IATROS.

MEDICAL ANECDOTES.

ANECDOTES, relating to history or biography, have ever been thought instructive, as well as amusing; that medical anecdotes would be well received by the profession, few will doubt; how far the following (which may be succeeded by others) are deserving of being preserved in the Medical and Physical Journal, the enlightened Editors will determine.

I. Fees of Medical Men.

E. Maynwaring, doctor in physick, in his *Praxis Medicorum antiqua et nova*, 1671, says, "Now imagine we were at a file of bills." [prescriptions.] This *recipe* cost the patient *ten shillings* fee, because he was but a doctor of *little* practice, not *cryd* up, and that was fair for him.

Here's another cost a *guiny*; this was a *great doctor's*, one of the eminentest in the town, a man of very *great practice*, that you must wait two hours before you can speak with him, except you give his man a couple of shillings; this must needs be an able man, that the people crowd after, much spoken of, and much approved by his *apothecary*, who gets four or five hundred pounds *per annum* by this *doctor's* practice; an excellent *apothecary doctor*! he deserved a piece very gallantly. But here is a *recipe* cost 3 *guynies*; this was the result of a *consultation*, for a person of quality, a beloved child, wife, or husband, or some rich fellow that would *die* more *honourably* than ever he had lived."

Robert Godfrey, Medicus Londinensis, in his "Various Injuries and Abuses in Chymical and Galenical Physick," 1674, tells of a "rich physician," who was employed to attend a poor washerwoman, and received a fee of only 2s. 6d. for each visit. "The doctor visited her once, and had one half-crown, which was more than she could clear by a week's washing; the second day he came again, without sending for, for the doctor's custom was, being once sent for, to follow his game close, and then he had the second half crown; and the third day, when he called in without sending for, the poor woman's last half-crown being hard to be parted with, she did not give him it; whereupon, being angry, he asked her at his departure, whether she thought he could run up and down for nothing?"

"Van Helmont tells you, in the words of the wise man, that

that a physician shall receive a gift of a king not of a poor man; thereby implying, that we are not to neglect the poor, though they are not able to bring *angels*, nor crowns, in their hands, for scribbling a few words to an apothecary."

Godfrey, in several places of his book, speaks of an *angel* as being the usual fee of a physician, yet it appears, from what has been mentioned above, that they were contented sometimes to take less.

ADVERTISEMENT.—At the Angel and Crown, in Basing Lane, near Bow Lane, lives J. Pickey, a graduate in the University of Oxford, and of many years standing in the College of Physicians, London; where all sick people, that come to him, may have for 6d. a faithful account of their diseases, and plain directions for diet, and other things they can prepare themselves; and such as have occasion for medicines may have them of him, at reasonable rates, without paying any thing for advice; and he will visit any sick person in London and the liberties thereof, in the day time, for 2s. 6d. and any where else within the bills of mortality for 5s.; and if he be called for any person, as he passes by, in any of these places, he will require only 1s. for his advice.

Postman, Jan. 16, 1700.

- 4 An anonymous writer, in 1702, says, "I have known an apothecary make fifteen pounds of a patient in ten days time, by rating the boluses at 2s. 6d. a piece, and other medicines proportionably."

The same author complains, that if a physician ordered an electuary of four ounces, the apothecary would divide it into twenty or thirty boluses, at 1s. 6d. each, and a quart apozem into four half pint phials, each charged 3s. or 3s. 6d.

Another anonymous physician, in 1669, says, "We many times prescribe a drachm of treacle, worth two pence, to a poor neighbour, out of charity; the apothecary makes him pay half a crown for a cordial bolus. There are of us, have retrieved some of our prescriptions, and the apothecaries' bills upon them; you will perhaps be amazed when I tell you, that where a physician hath, without a fee, prescribed something worth sixpence, because it was made into twenty-four pills, there was so many shillings paid to the apothecary upon his bill for it."

The usual charge for draughts at this time was 1s. or 1s. 6d. each; clysters 2s. 6d. and other things in proportion,

tion, which is infinitely more, considering the difference in the value of money, than is charged in London at present. One practitioner is mentioned to have "bragged, that he made from 20 to 100*l.* commonly, besides presents, for the cure of a gonorrhœa.

II. *Apothecaries intrenching on the Physician's Province, by visiting and prescribing to Patients.*

"The next thing to be treated of, shall be the ways of apothecaries creeping into practice. Heretofore when they were members of the company of grocers, and dispersed in place, as well as in counsel, they then were wholly subordinate to the physicians, only keeping in their shops, and faithfully making the prescriptions they received from the physician; and when made, sending them to the patient by their men, (as they still continue to do in foreign countries.) But in process of time, physicians, in acute diseases, having taught them somewhat, sent them to visit their patients, to give them the best account they could of the state of their health, and effect of their medicines. And of later years, some physicians took them along with them in their visits, whereby they acquired a little smattering of diseases, by which means they made people believe they had acquired some skill in the art, and afterwards began to venture a little at practice, and, but until these 10 years last past, kept themselves within some bounds and limits; but since that time, have daily more and more encroached upon our profession." 1669.

"In the plague time, [1666] (most physicians being out of town,) they took upon them the whole practice of physic, which ever since they have continued, being much helped also therein, by the dispersion of physicians into places unknown to their patients, by the fire."

Murett's Short View of Frauds and Abuses, 1669.

III. *Frauds of Apothecaries.*

Dr. Murett, in the above pamphlet, charges the apothecaries with "falsifying of medicines. First, they use medicines quite contrary to the prescription; myrtle leaves shewed the Censors for sena, a binder for a purger, mushrooms rubbed over with chalk for agaric, hemlock dropwort roots for pæony roots. Privet by some, by others dog-berries, for those of spina cervina; no purgers for a strong one; sheep's lungs for fox lungs, the bone of an ox's heart for that of a stag's heart, damsons for damasc prunes, syrup

syrup of lemons for that of citrons, bryony roots for mechoacan, &c.

IV. Number of Apothecaries in London.

“Hamburg (as Dr. Pitt’s book informs us) has but one apothecary’s shop; Stockholm and Copenhagen but four or five a piece; and Paris itself but one and fifty; whereas, in London and the suburbs, we have near a thousand.” 1702.

“Mr. Goodwin said, he desired the Censors of the College may demonstrate to this honourable house, out of above 1000 apothecaries shops in London, and seven miles circuit, how many they have destroyed in so public a manner.

Brief for James Goodwin, Chemist and Apothecary,
upon his Petition to the House of Lords. 1731.

ON THE FEBRIFUGE SUBSTANCE DISCOVERED IN THE PERUVIAN BARK.

THE celebrated chemist, Mr. SEGUIN, has read several memoirs before the National Institute, concerning his experiments for discovering the febrifuge principle in the Peruvian bark, its nature, and the quantity which is contained in the different sorts of that medicament. The exterior appearance and taste have hitherto been considered as the only means by which the goodness of that drug is judged, which, however, but imperfectly indicate the presence and quantity of the true febrifuge principle. With a view of ascertaining the quality of the Peruvian Bark in this respect, Mr. SEGUIN examined the constituents of this medicinal body separately, and also its chemical properties; by which means he succeeded in discovering very material differences in the febrifuge principle of the bark, from the other constituent particles. The chief characteristic of this substance is, *that it precipitates the solution of tannin, but not the solution of glue and of sulphat of iron.* When these marks are not perceived in the Peruvian Bark, it is a proof of its being either adulterated or entirely deprived of the febrifuge principle. The author having examined all the different sorts of Peruvian Bark was induced to conclude, that only a small quantity of pure bark is brought to us, as by far the greatest part of bark that is imported into Europe, possesses very little of the febrifuge matter;

matter; it is either of an inferior quality or not at all present in the common sorts of bark. These results are very important, as the Peruvian Bark proves efficacious in diseases only in proportion to the febrifuge principle it contains, and such barks as are deprived of it are rather prejudicial than useful to the constitution. This observation likewise induced Mr. SEGUIN to use his endeavours to find out a febrifuge substance which might be safe, efficacious, accommodated to the constitution, and at the same time so cheap, that no advantage could be derived from adulterating it. With this view he examined the true cause of fever, and the nature of the febrifuge principle contained in the Peruvian Bark, and in what manner it acted on the body. In consequence of his experiments and enquiries, he recommends the *glue or animal jelly, evaporated to dryness*, as a new febrifuge remedy, which unites in itself all the medicinal as well as economical advantages that may be expected.—This substance, therefore, has been tried in a series of cases, particularly by some Italian physicians, and is become a new matter of investigation amongst the physicians on the continent. A publication on this subject has been edited by Dr. *Gautieri*, in which a very favourable account is given of the animal jelly as a substitute for the Peruvian bark.

ON THE EFFICACY OF ANIMAL JELLY IN THE TREATMENT OF INTERMITTENT FEVERS; *from the Account given at the National Institute, by Mr. HALLE.*

MR. Seguin having read before the National Institute, a memoir on the advantages of animal jelly considered as a febrifuge, it was determined that a committee should be appointed, in order to ascertain the fact, and to make some decisive experiments. Patients were accordingly admitted into a particular ward of the Hospital of Perfection (*Hospice de Perfectionnement*) of the School of Medicine. The mode of administering the remedy, and the details of the regimen, were solely regulated by Mr. Seguin himself. The intermittent fevers that were treated under the inspection of the committee, were twenty-two tertians, or tertianæ duplicatæ; fourteen quartans; ten quotidians; and twenty intermittents of an irregular type.

Amongst these patients, twenty were affected with prolonged

longed autumnal fevers, eighteen with vernal fever, and six with new autumnal fevers; so that a great variety of circumstances took place in those experiments. The jelly had been prepared in the laboratory of the School of Medicine, and consisted of the best glue of Flanders, mixed with an equal quantity of sugar, dissolved in three or four times its weight of water; it was divided into square pieces, each of which was supposed to contain two drachms of pure jelly without the sugar or the water. The patients were ordered to take this jelly as well during the days of paroxysm as during those of intermission, in the morning, at noon, and in the evening. The dose amounted from three to six ounces of pure jelly; the diet consisted of roasted meat, half a litre (half a pint) of wine, and some prunes, and this meal was preceded by the use of a thick soup. Mr. Seguin, in general, ordered the patients to drink little, but allowed them a small quantity of brandy in the morning.

Of fifty-eight cases of intermittent fevers, on which the committee made their observations, fifty four terminated, after a greater or less number of fits, with an absolute or temporal cessation of the fever; this may either be ascribed to the action of the jelly, or be owing to the ordinary course of nature. Four fevers of the above kind, on the contrary, have resisted this treatment; two of the patients quitted the hospital without any relief; but the two others were cured, one by Peruvian bark, and the other by the use of ammonia, and of opium.

On the whole, the results which the committee have published are the following:

1. The diminution of the cold fit has been always so constant, and taken place so regularly in a number of patients, as to consider this phenomenon as affected by the jelly, which effect may likewise have advantageously influenced the termination of the fever itself.

2. The termination of the fever, though always preceded by the diminution of the cold fit, has, however, not been on an average proportionable to the first effect; as in general, it has not succeeded immediately, but proceeded in many patients so slowly, as to be evidently owing to the action of the jelly. This consideration, and the instances of the natural termination of fevers of this kind, render it uncertain which of the cases that fell under the committee's observations can be distinguished as being cured by the sole action of the jelly from those which may be owing to the power of nature only.

3. A certain number of cases have been observed, which were readily cured; others, in which the diminution of the symptoms has made constant progression till the absolute cessation of the fever; others again have come under the observation of the committee, in which an increase of the doses of the jelly has almost immediately produced a cessation of the fever, which therefore seems, in all probability, to be the result of the advantageous use of that remedy. These considerations, supported by about five and twenty detailed cases, lead us to suppose that each case affords an instance in which the phenomena of cure may be explained in favour of the great utility of animal jelly in these particular cases.

4. On comparing the effects produced by the jelly with the mode in which good Peruvian bark operates in removing fevers, when given in proper doses, and under convenient circumstances, it cannot be doubted that the efficacy of the jelly, such at least as has been observed by the committee, is by no means equal to that of good bark, as well with respect to the certainty, as to the perfection and continuance of effect with which the latter operates. One of the cases related by the committee proves, in a particularly evident manner, the difference in the action of the two remedies.

5. This observation likewise evinces, that in fevers which take or have the character of pernicious intermittents, and which are attended with imminent danger, the bark is a remedy for which the jelly can never serve as a substitute.

6. The action of the jelly is distinguished by some advantage, as being never followed by any inconvenient symptom, though it had been given in considerable doses, and sometimes continued longer than was necessary for determining its efficacy. It never produced any unfavourable symptom in fevers complicated with obstructions of the viscera, which makes us presume that it may be of use in such cases where bark is not given without inconvenience.

7. With respect to the cheapness of the jelly, compared to the price of the Peruvian bark, it may be stated, that the use of that substance is by no means so expensive, as it need not be continued for a long period; but when the fever prolongs itself, notwithstanding the administration of the jelly, as has been the case with a great number of patients, the expences attending the employment of this remedy are nearly as great, if not greater, than from Peruvian bark, particularly if the diet is put in calculation

which is supposed to be necessary during the use of this mode of treatment.

8. The most obvious advantage which this remedy presents in the cases in which we may consider it as a febrifuge, consists in its being a remedy of easy preparation, which may always be at hand in places and under circumstances when it is impossible to obtain good Peruvian bark.

According to these observations, and the treatment executed under the eyes of the committee, the evident utility of the jelly may be stated as follows :

1. That it possesses the property of diminishing very sensibly the symptoms of the cold fit.

2. That its febrifuge action is not proved by evident facts, but rendered very probable by several instances.

Considering the importance of a discovery by which a common alimentary substance is proposed as an efficacious febrifuge, and observing that the experiments on which the conclusions of this account are founded, have not yet been made on a sufficient number of patients, nor continued during a time long enough for all circumstances of the different seasons, and all the varieties in which intermittent fevers appear, and for ascertaining the conditions under which this remedy may be serviceable, and the limits of its utility; the committee appointed for this purpose has proposed to the National Institute, that the continuation of those experiments might be ordered, and measures be taken for facilitating their execution, and for rendering them as complete and conclusive as can be desired.

OBSERVATIONS ON THE GUINEA WORM.

MR. Larrey had an opportunity of observing, when in Egypt, several inflammatory tumours, which in Africa are generally attributed to the presence of a worm, said to have penetrated under the skin, and where it is universally believed, that the ulceration caused by this animal, cannot be healed but by the complete extraction of it. The method therefore adopted for curing that complaint, consists in winding round a small stick, a whitish fragile filament, which is supposed to be the body of the worm.

The

The greatest caution is recommended not to tear it, for if, unfortunately, it should happen to break, this is thought to produce the most serious consequences from the worm penetrating deeper; amputation of the member affected with this disease is supposed to be necessary, and the life of the patient to be often endangered.

The physicians and travellers who have described this disease, by which white men are but seldom attacked, do not agree with respect to the causes of the formation and the origin of this worm. In Egypt it is called worm of Pharaon; in Africa, Guinea-worm; in the West-Indies, Vena Medinensis; and in Jamaica, Colubrilla.

Mr. Larrey thinks that the symptoms attending these tumours, which he considers as a simple furunculus or anthrax, are produced by the operation undertaken for the purpose of extracting the worm, and which are aggravated when the operation fails. He has very attentively examined the nature and form of the whitish filament, but he could not discover the slightest analogy with a worm; and he even convinced himself, by dissection, that this thread is nothing but dead cellular texture, which is drawn into a filament through a hole of the skin, when a small portion of it is seized in order to twist it round a piece of wood; and it is by means of this improper manœuvre, that cylindrical pieces of this cellular texture are obtained long enough to be confounded with a true worm. He has since had many opportunities of ascertaining this assertion; by seizing the cellular texture in a simple furunculus with the pincers, he obtained the same result. Mr. Larrey acknowledges that he is of the same opinion with Dr. Delaborde, who during his residence at Cayenne, after a great number of observations, adopted the same idea.

Mr. Larrey has added to his memoir, some observations on two negroes attacked with the vena medinensis, whom he treated at Cairo. The first, aged nine years, was committed to the care of an Egyptian physician, who immediately began to wind out the supposed worm, whereby the young patient suffered the greatest pain. The furunculus was situated on the malleolus internus, and surrounded with a bluish ring, which made the part appear as if it was becoming gangrenous. Mr. Larrey, however, having cut off the thread as close to the furunculus as possible, applied emollients with saffron on the tumour, and administered to the patient alternately diluents with Peruvian bark. A few days after an abscess had formed itself, which

being opened with a bistouri, the patient got better, and was cured in a short time.

The anthrax of the second negro had formed on the foot, and from the point of this ulceration issued a blackish core, which would have been taken for the head of the worm. Mr. Larrey prescribed emollients without touching the supposed worm. The inflammation ran through its periods, and an abscess was formed, which he opened as in the former case. The condensed cellular texture issued with the pus in form of small flakes, and the negro was perfectly cured in a fortnight after he had perceived the complaint.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

NO errors should be permitted to pass unnoticed in a work so widely diffused as your Medical Journal, which contains a fund of useful documents, that are not only consulted with pleasure and instruction by the experienced practitioner, but which are also greedily sought after for information by the juvenile tyro, whose mind has not been sufficiently expanded over the wide ocean of medical science, to enable him to shun those dangerous rocks with which it abounds, or to avoid his being misled by those *wild and extravagant fancies*, which speculators in physic are for ever throwing in his way.

Your correspondent, Mr. Humé; (whose observations on the nomenclature of modern pharmacopœias, in a former number of your Journal, are very worthy of notice) I now perceive begins to turn his mind to surgery; and having taken the hint from Mr. Hardman, in your last number, proposes the application of *exhausted cupping glasses* as a preventive and *immediate cure* of hydrophobia.

Fortunately for mankind, the hydrophobic fever, or mania, does not occur sufficiently often to allow of many experiments being made, and a plan of treatment has been long known and practised with the greatest success in preventing its occurrence; but I am sorry to say, that very little progress has been made beyond this, for we are completely ignorant of any very successful mode of treating it, when its symptoms do occur.

The

The application of suction to wounds, which have been inflicted by *rabid* or *venomous animals*, was well known to and extolled by the ancients, and I believe it is practised to this day, in those barbarous countries where poisons are used to render more dire and destructive their implements of carnage.

Suction, if likely to be of any kind of service in preventing hydrophobia, ought to be applied immediately after the injury has been received; it operates by taking off atmospherical pressure, and promoting a discharge of fluids from the wounded parts, if recent. We are now to suppose, that, with these fluids, the whole of the poison which has been inserted by the *rabid animal*, will be extracted from the wounds, otherwise we cannot expect that our operation will be productive of the intended effect. Now I will candidly ask Mr. Hume, if he suppose such an effect certain, or very likely to be produced, or that such a practice ought to be depended upon?

But to examine the matter a little further; Mr. Hume not only recommends the application of *cupping glasses* as a preventive, but as an *immediate cure* of hydrophobia: I think that I have already proved in the most satisfactory manner, how little dependance should be placed on such an application as a preventive of *hydrophobia*; nor will it be very difficult for me to show, that when the *disease* has actually taken place, the application of *cupping glasses* will be of no service whatever.

When the disease termed hydrophobia has taken place, which may be known by the great *anxiety*, *fever*, and *dread* of swallowing fluids, it is supposed, from analogy, supported by a great many facts, that *matter* of a peculiar nature, which had been lodged in the wounds inflicted by the *rabid animal*, is become absorbed into the system, and has produced its specific effect. Presuming this to be the case, what advantage is likely to be derived from the application of *cupping glasses*? One might as well apply *cupping glasses* over the arm of a child inoculated for the small-pox, with an intention of checking or renewing the eruption and fever when they have made their appearance. The application of powerful *caustics*, or excision of the immediately contiguous parts, I believe, are the only remedies to be depended on, in the prevention of *Hydrophobia*; nor is there, to my knowledge, any case on record of their having failed of producing that effect, when extensively and properly applied; and in a case which

came under my care upwards of three years ago, I applied caustic with success, notwithstanding my patient, for a long time, laboured under the most dreadful apprehensions for the consequences; the animal (pointer dog) too, in this case, exhibited the most unequivocal symptoms of the disease.

The best kind of caustic, and what I employed in the above case, is the *calx cum kali puro*, commonly termed lapis infernalis.

Most of the animal poisons have their effects upon the system weakened by the internal and external exhibition of alkalis; if this be the case with the *poisonous matter* producing *hydrophobia*, we might be led to expect a double effect from the alkali contained in the above caustic.

I cannot close my remarks without stating a surprising fact, well known to many practitioners, viz. that it is not uncommon for the wounds inflicted by a *mad animal*, to heal as kindly as similar wounds from an animal in health; yet the disease at length has been produced, sometimes after a lapse of several months from the accident: this shows us how fallacious the rule is, which I know to have been practised, of determining upon the nature of the case from its rapid or tardy progress towards healing; it also gives us confidence in a practice, which may be successful in preventing the disease a long time after the accident has been received.

I am, &c.

Tavistock Row, Covent Garden, Oct. 7, 1804. ROBERT LOWE,
Member of the Royal College of
Surgeons, London.

To the Editors of the Medical and Physical Journal,

GENTLEMEN,

THOUGH not feeling any symptom of the *cacoethes scribendi*, but rather wishing to have done with the occupying of so many of the pages of your valuable Journal, from month to month, I yet find imposed on me the *onus* of taking up the pen. John Ring, the indefatigable champion

pion of vaccination, says, in your last number, (p. 356) that the variolous pustule, excited by inoculation, does not break into a number of pustules. He may be perfectly right in this assertion, yet I cannot help thinking, that in the irregularly formed vesicle running on to a considerable extent under the cuticle, and at length breaking, I have seen the source of those vesicles close by the inoculated part, which, he says, are secondary pustules. Of the pestilential variola, now about to take its departure from the world, what were the local effects when under controul by inoculation? The following statement of them from Woodville's Reports, induces me to think that I have not been quite mistaken in the notion that the variolous pock breaks into a number of distinct vesicles.

“ In cases wherein inoculation of the small-pox proves effectual, a small particle of variolous matter being applied by a superficial puncture of the skin, usually produces in the course of three or four days, or sooner, a little elevation of the punctured part, discoverable by the touch, and a red speck distinguishable by the eye. From this time the redness advances in a circular form, more or less rapidly, according to the constitutional circumstances of the patient; and the first effect of this superficial inflammation is the formation of a vesicle upon its centre, which usually appears between the fourth and seventh day after the inoculation. The extent of this vesicle is generally found to bear some proportion to the intensity of the inflammation, and contains a limpid fluid, by the absorption of which, the small-pox is produced. The vesicle soon bursts, and the central part of the puncture becomes depressed, and often of a dark hue; which appearances, together with the marginal inflammation, continue to increase till the eruptive symptoms subside, when the edges of the depressed part begin to swell with a purulent fluid, and the inflammation gradually recedes.”

From the importance which I attach to what comes from the pen of a Ring on the subject of vacciola, I am particularly induced to reply to him in defence of the removal of that scab, (p. 243) on the taking of matter, which is sometimes seen in the centre of the pock, from its most incipient state. What he calls a hazardous experiment I consider an act of the most wholesome precaution; I am even strongly persuaded, that most of your readers who practise vaccination, must have often

met with the genuine vesicle, which requires this precaution; and that they must naturally have used it. From p. 303, of your last number, it appears to have met the eye of Jenner. The scab, with "the perfect vaccine fluid in a ring around it," must, I think, have been the pock in question. It is uniformly produced on the application of active matter by such insertion of the lancet as produces rather incision, I mean of cuticle only, than, literally, puncture, though he refers it to another cause.

The ingenious and learned paper of Philologos, (p. 335) renders it unnecessary for me to advance any thing further in defence of vacciola, in opposition to vaccina. Vaccavara appears to me to be the only correct term yet proposed. Exclusively of its being one word, it is preferable to Jenner's variola vaccina, if vara be a more precise term than the diminutive variola for the now departing pestilence.* Till this last correction, (vara for variola) with many others, shall have taken place in medical language, it may be best for the sake of euphony, and because of the similitude even of vacciola to the long adopted term variola, to continue to speak of the vaccinator with vacciulous matter, producing true vacciola in subjects which have never yet had the small-pox. If as great an effect could be produced on the constitution by small-pox inoculation after vacciola as is frequently produced by vaccination after the small-pox, whether had naturally or by inoculation, the discovery of Jenner would have never made its way in the world as it has happily done. Of medical men and others I know many who, as well as myself, have by design vacciolated themselves after the small-pox. I know some others, both men and women, who have been vacciolated by accident, and who, according to the seat of the wound, have been much affected with cervical, axillar, dorsal, lumbar, or inguinal tumefactions, indurations, or pains.

It happens to me, sometimes frequently in the course of a month, that patients brought to be examined, a week after

* I have little doubt but Philologos could find a short classical compound sufficiently characteristic of the desolating disease. The accommodating inventor of the term vaccine-pock; mingling together Saxon and Latin, might give it such discordant name as *drad-bura*, and might defend the term by saying, our whole language is of heterogeneous mixture; why may not a single term be so? *Drad*-vara is two or three syllables shorter than *horrida vara*, or *vara horribilis*, and expresses about as much.

after inoculation, present a pock so far advanced, and with so stained and even crustaceous a kind of surface, that I immediately hesitate, and decline taking the matter. On inquiry I find, that the patient has, at different times, been in the way of the small-pox, though he did not know that he had ever had it; or that when an infant, he had a few spots which the relations took for chicken-pox or swine-pox, but which the effect of vacciolation (inoculation of vacciolous matter) shews me at once to have been the small-pox. These different eruptions have often been mistaken for each other. It will be well if those medical gentlemen, numerous and of unquestionable character, who have undertaken to investigate the case in Fullwood's Rents, page 584, Sept. 26, (of which your *status quo, et tempore* is very exact) be able to make accurate discrimination. On the seventh evening of the eruption I saw the child, and by candle-light declared it to have very much the appearance of a well marked case of small-pox. A physician present, whose medical report meets the public eye to a very great extent, once a month, said, if it was not a case of small-pox, he had never seen one; and that he should not wonder if it proved fatal. It is not wonderful that he should form such an opinion from the uneasiness of the child. It had been much teased in its cradle by numerous medical visitants, and many vesicles had been punctured for matter for experiments. He urged the question, whether I did not consider it to be small-pox. Though very much resembling variola, I remarked, it might yet be found to be varicella. On seeing the child running about the next morning, (what kind of small-pox was this?) the eruption on the face in a state of desiccation, the vesicles on its body and limbs plump and full, giving me the same idea of a capability of bearing pressure as a bunch of ripe grapes or currants would, I declared my full conviction of its being varicella. A physician present said the eruption was too watery to be the small-pox. Some surgeons declared themselves more strongly, that it was chicken-pox. A few days afterwards, I accompanied Dr. Woodville to see the case, when, being more advanced, it became proportionally more obscure. He said, on the occasion, that if it should be found to be the small-pox, the cow-pock inoculation stood upon as good ground as the variolous; for that it had happened in the course of a year that several patients had come to the hospital sprinkled with the small-pox, who had previously gone through

through the variolous inoculation.* Whether the committee alluded to will be able to satisfy themselves, or only to puzzle themselves the more by the investigation of the effects of the series of inoculation instituted, the commencement appears to have been nearly as legitimate as is possible, in the present state of the question. If the first inoculation produce small-pox, with its most dismal train of subsequent disease, blindness or death, the father of the child will only have to reproach himself, as he had previously sworn he would shoot the practitioner, if, under semblance of inoculating small-pox, he introduced the filthy cow-pock. I hope every member of the committee, before coming to a decision, may peruse the excellent paper of Macdonald, the second article of your last number. In the minds of many, who already most unwaveringly decide, and to whom I must appear ridiculous in venturing yet to doubt, a becoming hesitation may be produced. Hail, Vacciola! Hail! Clearness belongs to thee. Thou hast not a *fac simile*.

John Ring complains, that a certain publication, "ready to receive and circulate any lie that is fabricated against vaccination," refused admission to a respectful representation of the impropriety of admitting anonymous attacks on persons, and anonymous reports on so important a subject as cow-pox. Feeling myself somewhat implicated in the
detraction

* Though the declaration of Woodville must alone be sufficient to prevent the vacciolous inoculation from falling into disrepute, if the committee shall at length find that the case under investigation have been a true case of small-pox, yet it may be well for them to remember, that in an institution where so many thousands have annually been inoculated, it is quite a possible case that a mistake might happen in the record; that the vaccination may have been incomplete. The following piece of egoism will be my sufficient apology with the worthy officers of the *really* original public institution of vaccination for entertaining the idea. Before the organisation of the Royal Jennerian Society, I, *per se*, I, had gratuitously vacciolated several hundreds in this metropolis. Since my election to their Central House, I have had the happiness of being the instrument of protecting twice as many thousands. The office of Resident Inoculator, in one instance, resembles that of prime minister; he is liable to become a public butt. The attempts to throw me out, did, in the beginning, induce in me such habits of vigilance that I cannot help most confidently trusting, that the "thousands" are as secure from variola as vacciola can render them; of the certain protection of the "hundreds," my hope is not quite so ardent. There may have occurred an instance or two, where I may have taken it for granted that the vaccination was complete, on proof more equivocal than I should now venture to receive; or I may even in haste have noted cases as complete in the register, from memory, and thus have committed some mistakes.

detraction of my colleague, I offer you some testimonials which are not anonymous ; I suppose that the " lie" has grown out of the facts which are stated in the document from Valette.

" To the INHABITANTS of MALTA.

" Some time has now elapsed since Dr. Marshall and Dr. Walker have began to practise the Jennerian inoculation in Valette, and experiments have shewn that no one who has passed through that disease is afterwards capable of taking the small-pox. At the present moment, two children who were inoculated by Dr. Marshall are ill in the small-pox from having, previously to their inoculation with the cow-pox, been exposed to the infection of the small-pox, which, at the time of their being inoculated with the cow-pox, was in the body.

" In one of the children, the part inoculated with the cow-pox matter never inflamed, and the child fell ill with the small-pox in four or five days ; in the other, the incised part inflamed, and proceeded as usual till the sixth day, when she also fell ill with the small-pox. These two cases, thus fairly stated, shew that they must have been infected with the small-pox at least three or four days previous to being inoculated with the cow-pox ; one of them never inflamed ; the other, the moment the small-pox appeared, lost its inflammation and turned to common matter.

" As no doubt many reports, prejudicial to the Jennerian inoculation may be spread abroad by interested people respecting these children, it is thought necessary to publish this true statement of the affair, that the inhabitants may be upon their guard against all such reports, and to assure them, that it is impossible for any one that has passed through the true cow-pox ever afterwards to be infected with the small-pox.

Protomedico LUIGI CANEANA,
Il Med. di Palazzo, BR. LOREZO CATTAR."

Valette, Feb. 27, 1800.

" General Mem. Foudroyant, Malta, Dec. 9, 1800.

" The small-pox having made its appearance on board the Alexander, and other ships in the fleet, the Commander in Chief thinks it necessary to refer the respective Captains to the general memorandums of the 19th October last, and to recommend immediate application to Dr. Marshall and
Dr.

Dr. Walker, whose safe and excellent mode of treatment has been experienced on board the *Foudroyant*, and other ships, in preventing the dreadful effects so often attending the small-pox, which may now so easily be avoided without danger or inconvenience.

“ By command of the Vice-Admiral,

“ Signed, WILLIAM YOUNG.”

“ To the respective Captains, &c.”

“ These are to certify, that Drs. Marshall and Walker have administered the vaccine inoculation to such of the crews of all his Majesty's ships, under my command, at Gibraltar, Minorca, Malta, the Port of Marmarice, and on the coast of Egypt, as had the opportunity, and were desirous of submitting to the operation: That these gentlemen have manifested the greatest assiduity for the extension of the practice, bestowed the most unwearied attention to its successful application, and have, according to the information I have received from all quarters, exhibited it with perfect success.

“ Given under my hand, on board his Majesty's ship the *Foudroyant*, in the Bay of Aboukir, 29th March, 1801.

“ KEITH.”

“ Camp, four miles from Alexandria, April 11, 1801.

“ This is to certify, that Drs. Marshall and Walker attended at the hospital at Malta, for the purpose of inoculating the respective regiments of the expedition to Egypt, according to the general orders of the late Commander in Chief, Sir Ralph Abercrombie, at which time the small-pox had got into the fleet, and was very fatal.

“ Dr. Walker accompanied the expedition, with the approbation of the Commander in Chief, to Egypt, and introduced the new practice into the army in general, which was found effectual in arresting the ravages of the small-pox, those soldiers escaping it who submitted to this operation, and doing their duty as usual, while a few, who neglected the opportunity, were laid up.

“ We now experience his services in another way, he having consented to be associated with the surgeon of the brigade of seamen on shore; and from Sir Sydney Smith finding it necessary to have the attendance of the surgeon at a distance from the camp, the medical care of the whole brigade falls upon him. —

“ Major

“Major General Hutchinson feels a sincere pleasure in recommending Drs. Marshall and Walker (for their indefatigable zeal in the service) to his Royal Highness the Duke of York, who ever takes so lively an interest in what ever renders the situation of the soldier comfortable.

“J. HELY HUTCHINSON, Major General.”

In noticing (Med. and Phys. Journal, Jan. 1803) the remuneration granted us for our services, so honourably testified of by the Lord Keith, I mentioned that the Admiralty had not yet paid off the disbursements they had granted us. To the present first Lord of the Admiralty I have made the representation, and already experienced some generosity from himself. I hope shortly to be able to add, that he has obtained us payment from the board.

Yours, respectfully,

JOHN WALKER.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

I AM sorry to see that Dr. Macdonald, in his observations on Mr. Goldson's Pamphlet, has committed himself by introducing me, as hostile to vacciolation: I conceive there is considerable indelicacy in thus attacking a person, whose sentiments he most certainly does not know. I shall not degrade myself, nor the character of my profession, by answering him in the same style in which he has chosen to use my name*; I think it sufficient for me to observe, that the conclusion he has drawn, from seeing my name in the pamphlet above alluded to, is diametrically opposite to the truth; I however, confess, that I would rather Dr. Macdonald should be in an error, than I an enemy to the new practice. Gentlemen should support their opinions by a temperate relation of facts, and fair dispassionate argument, and should on every occasion, let the difference in their sentiments be ever so great, treat each other with becoming respect.

By

* See London Medical and Physical Journal for October, pages 314. and 316.

By giving this letter a place in your Journal for the ensuing month, you will greatly oblige,

October 9, 1804.

Yours, &c.

SAMUEL HILL,

Surgeon, of Queen Street, Town of Portsea,
and Surgeon in the Royal Navy.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

IN your last number I gave some account of a case which lately occurred at Kensington. I there intimated, that Mr. Merriman of that place, who, it was pretended, could attest the facts, was not sufficiently acquainted with the case to be a witness. It has been represented to me, that the concise manner in which I expressed my sentiments, might give rise to misconceptions: I therefore requested Mr. Merriman to favour me with an account of what he knows of the case, that I might insert it in your Journal. In consequence of this application, I received the following statement.

"I have not seen the Review; nor did I ever hear that any notice had been taken of the case; much less that my name had been made use of in so unwarrantable a manner; or I should have insisted on the Editors of that publication contradicting that part of the account, which relates to my attesting the fact of the child having had the cow-pock in a regular manner. My attestation can go no farther than as to the small-pox."

I have also received a statement from Mr. Cockle and Mr. Faithorne; in which they declare, that *when particularly questioned* concerning the scab on the child's arm, after the pretended cow-pock, Mr. Meredith *positively affirmed it never turned black, nor even dark.*

In one respect, the Kensington case resembles that in Fullwood's Rents. It is easy to prove the child had the small-pox: the only difficulty is, to prove that it ever had the genuine cow-pock.

I am, &c.

New Street, Hanover Square.

JOHN RING.

To

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

IN your Journal for May, 1803, you have given some account of the introduction of vaccine inoculation into Greece, and several parts of Asia; an account of its introduction into Turkey had been given long before. Having about ten months ago received from Dr. De Carro a work, entitled the History of Vaccination in Turkey, Greece, and the East Indies, I embrace the earliest opportunity afforded by other avocations, of transmitting a concise analysis of that valuable and interesting publication. It is, indeed, particularly interesting to Britons, since it contains additional evidence, that their countrymen have been the happy instruments of diffusing the blessings of Vaccination over a considerable part of the globe.

Dr. De Carro dedicated his first publication on this subject to Lord Minto, at that time the British Ambassador at the Court of Vienna; the present he dedicates to the Hon. Arthur Paget. These marks of respect he considered as due to the British Nation; the first, because it relates to a discovery, for which the world is indebted to this nation; the second, because it relates to a quarter of the world, in which she has so far extended her empire, and the glory of her arms.

Dr. De Carro observes, that, whether owing to the want of a good understanding between the foreign physicians settled at Constantinople, or to the difficulty of making the Turks sensible of the advantages of vaccination; the first successful experiment, in the family of Lord Elgin, did not produce so much effect as might have been expected. The practice was repeatedly discontinued, and only renewed by the arrival of fresh matter, till it was adopted by Dr. Hesse, a German physician.

This gentleman went to Constantinople, with the intention of settling there as an oculist; but was on the point of quitting Turkey when he received from Vienna some cow-pock matter; which induced him to alter his plan, thinking it probable that he might succeed better from the practice of vaccination, than from the profession of an oculist.

The first child of the Earl of Elgin was vaccinated by Dr. Whyte, the second by Dr. Scot. These gentlemen
also

also vaccinated some children in the families of Ambassadors, and other foreigners of distinction; but they were not able to overcome the prejudice of the natives. This was in a great measure reserved for Dr. Hesse, who successfully practiced vaccination in Constantinople for the space of a year and a half.

In the month of March, 1802, the Earl and Countess of Elgin, and Dr. Scot, sailed from Constantinople, with an intention of making a voyage to the Islands of the Archipelago, and the greater part of Greece. During their absence, vaccination was practiced by Dr. Hesse, Dr. Pazzoni, physician to the Spanish Ambassador, and Dr. Auban, physician to the French Ambassador: but on the departure of Dr. Hesse, it was suffered to become extinct.

"Our voyagers," says Dr. De Carro, "did not neglect vaccination during their stay in those celebrated countries." The following is an extract of a letter which he received from Dr. Scot on this subject.

"You will be much pleased to hear, that the blessing of vaccination has been communicated to the celebrated city of Athens, where we have stayed a long time; and that it is probable, it will thence propagate itself through the different parts of Greece.

"Immediately on my arrival, I sent for Dr. Cassgitti, the principal physician of Athens; and, having conversed with him concerning the origin and the character of vaccination, I vaccinated two children in his presence, and succeeded in one of them. This child served to vaccinate a great number; and at the time of our departure, more than eighty persons, of all ages, had been vaccinated with the usual success. Dr. Cassgitti appeared to me to be a judicious and active physician; I made him a present of a copy of your work.

"I also spoke to the principal surgeons of Argos, Corinth, and other celebrated cities, on the subject of vaccination; and although they have still some prejudices to conquer, I doubt not but its advantages will be very generally acknowledged in Greece, as well as every where else.

"But while I inform you of all that we have done during our voyage, you will be surprised to learn, that they have ceased to propagate vaccination at Constantinople. Dr. Hesse, who was the principal vaccinator, being about to leave that country, neglected to keep up a fresh supply of matter.

WM. SCOTT.

In

In addition to this account of the introduction of vaccine inoculation into Greece, Dr. Scot himself, when in England, favoured me with the following particulars.

On his arrival at Athens, in April 1802, he had some conversation with Dr. Cassgitti, who was educated at Pavia. The little he knew of vaccination was from the Literary Journals. No such disease in cows had been observed in that country.

The Athenians, who, notwithstanding their present state of subjection, still retain something of the quick and penetrating spirit of their ancestors, were so struck with the mild nature of the cow-pock, when compared with the small-pox, that they eagerly brought their children to partake of the benefit. Fresh matter, with instructions, was sent to Thebes, Corinth, Argos, and other places; for the result of which, as well as the progress of vaccination in Laconia, he referred me to a letter he had received from Dr. Cassgitti, which is now in my possession.

In this letter, dated October 1802, Dr. Cassgitti informs Dr. Scott, that he had no more subjects to inoculate. He also gives an account of the progress of vaccination in different parts of Greece.

A brother of Dr. Cassgitti, having introduced vaccination into some of the country parts of Laconia, where the small-pox made great ravages, was induced to set a price on it, in order to reimburse himself for the expences he had incurred; but the artful inhabitants, though rich to an excess, commenced the practice themselves; and propagated it from one village to another, in such a manner, that the practitioner who introduced this novelty, soon discovered he was no longer of any consequence in that neighbourhood.

In my Treatise on the Cow-pox I have related some particulars concerning the introduction of the practice into Salonica; and therefore deem it unnecessary to repeat them here. Dr. La Font informed Dr. De Carro, "that he esteemed himself very happy in having it in his power to pay the City of Salonica the tribute of acknowledgment, which the world owed her; for having been the birth-place of the old woman who practised inoculation at Constantinople, when she attracted the attention of the celebrated Lady Mary Wortley Montague,"

The matter which Dr. La Font received from Dr. De Carro upon ivory lancets, readily succeeded; and all the inhabitants of Salonica adopted vaccination with an eagerness worthy of the most enlightened people. Turks, Armenians,

menians, Greeks, Franks, all had recourse to this preservative; and the inhabitants of the neighbouring towns, wishing to enjoy the same blessing, Dr. La Font instructed pupils, in order to spread the practice.

Dr. Moreschi of Venice, who first introduced vaccination into that city and a great part of Italy, and published two works on the subject, also had a considerable share in disseminating the practice through Dalmatia and other provinces, situated on the Adriatic; and through the greatest part of Greece.

Dr. Hesse is said to have been the principal inoculator of the cow-pock at Constantinople; but several other physicians contributed to the same laudable design. Among others, Dr. Roini, physician to the Grand Seignior, printed an extract from Dr. De Carro's Treatise on the subject, translated into the Turkish language, and presented it to his Highness, who had suffered much from the small-pox. He expressed his regret that the discovery had not been made in his youth; and desired it might be adopted in his territories. Dr. Roini vaccinated a child of one of the servants in the Seraglio; but the Turks, who are always enemies to innovations, did not embrace vaccination with any degree of zeal: so that the practice again fell into disuse.

It was again revived in the beginning of the year 1803; when Dr. Auban, physician to the French Ambassador wrote to Dr. De Carro for some matter; and informed him, that more than a hundred persons, of different nations and religions, waited with impatience for the arrival of this preservative. He added, that up to this period he had only vaccinated one child of any Turk; but that among those ready to undergo the operation, were three children of the first physician of the Grand Seignior.

At the same time Dr. De Carro received a letter from the Earl of Elgin, requesting matter for his third child; the success of which may be learned from the following extract of a letter, which I received from Dr. Scot when in England, dated October 30, 1803.

"I often conversed with Dr. Roini, physician to the Grand Seignior, upon the salutary influence of vaccine inoculation; and the number of lives that might be saved, if it were generally adopted in the Turkish empire. I found him zealous to promote its progress; he recommended it strongly to several of the principal men in power.

"As a little tract, published at Palermo, by Dr. Marshall, appeared to me well adapted to popular use, I gave him

him a copy of it; which he got translated into the Turkish language. But notwithstanding all the care taken to encourage vaccination at Constantinople; either from neglect, or want of opportunity, it had fallen into disuse; and, upon my return thither, in October 1802, no matter could be procured.

"I was, therefore, under the necessity of sending to Dr. De Carro at Vienna for a supply. After some failures, it was renewed last January, in the son of the Prussian Minister, and in Lady Harriet Bruce, second daughter of the Earl of Elgin. Recent matter was thereby afforded to different practitioners; and, among others, to Dr. Auban."

This is the gentleman who flattered himself, that he had discovered vaccination to be an antidote for the plague. Dr. Valli, who arrived at Constantinople about that time, coincided in his opinion; and was so far convinced of the reality of this hypothesis, that he inoculated himself with pestilential matter; but he paid dearly for his temerity, by catching the plague, which he did not survive without some difficulty.

Dr. Auban informed Dr. De Carro, that the Armenians have much greater confidence in Vaccination than the Turks. But an ignorant practitioner has damped their ardour, by producing the spurious pock in three of their children; one of whom fell a victim to that disease. Hence the opinion of Dr. Auban, that cow-pock matter possessed an anti-pestilential virtue, though visionary, was not without its use; for it served to revive the practice; and the Turks, who had rejected vaccination as an antidote for the small-pox, adopted it as an antidote for the plague.

Dr. Valli is recovered of this disease, and Dr. De Carro informed me in his last letter, that he had seen him at Vienna.

Dr. De Carro is of opinion, that the zeal of our countrymen in Asia, and of the natives, for vaccination, should make those practitioners in England blush, who still inoculate for the small-pox. He is confident, that no children have been inoculated for the small-pox in any part of Germany for two years past. He says, the operation is absolutely forgotten; and thinks it as difficult to find patients who would submit to the operation, as medical men who would perform it.

Having sent Dr. De Carro a copy of the Reverend Mr. Warren's excellent popular publication on the subject of inoculation of the cow-pock, he informed me that they have innumerable addresses of this kind in Germany, published

lished by clergymen of all ranks; and, that although they are in a great measure a copy of each other, they have been of great service to those for whose use they were intended. This is an example worthy of imitation.

Dr. De Carro enjoys the enviable satisfaction of having diffused the blessing of vaccination through a great part of the continents of Europe and Asia. This country is peculiarly indebted to him, for the introduction of the practice into her extensive colonies in the East Indies; and the Directors of the East India Company appear to be sensible of the importance of the service.

An account of the commencement and progress of vaccination in India has already appeared in this and other channels. The matter was sent by an overland dispatch, by way of Constantinople, to Bagdad; where it succeeded in the hands of Dr. Short, physician to Mr. Jones, the English Resident. From this place it was transmitted to Bus-sora, where it succeeded in the hands of Dr. Milne, physician to Mr. Manesty, the English Resident. From this place it was transmitted to Bombay.

Some particulars of the rise and progress of vaccination in India have already appeared in this and other channels. In that part of the world, the small-pox is more fatal, and population more scanty. It is, however, but justice to our countrymen in India to say, that their zeal and exertions have been commensurate with the occasion.

Dr. Milne not only forwarded matter to Bombay, but also to Persia and Arabia. I shall here insert a very interesting extract of one of his letters to Dr. Scot, dated May 1802, which was communicated by that gentleman to me.

“ Within the last month I have inoculated upwards of thirty subjects of different ages; and have both transmitted matter by, and vaccinated, several people belonging to three different vessels, which have been dispatched hence for Bombay. I have also sent materials into Persia, by the way of Bushire; and furnished the means of inoculation to the Resident at Muscat.

“ The postscript of your letter, stating that the common diseases of children have been benefited by vaccine inoculation, has added much confidence to the opinion I had formed of its salutary action, from reading Dr. Jenner's book. I have therefore never hesitated to inoculate every person that has been brought to me; and have the pleasure to state, that a child who had been a long time subject to an intermittent attack, accompanied with a dropsical swelling

ing of the belly, has been completely cured by vaccination. This case, with some others, I have drawn up, and sent to India."

From Dr. Milne's letter, and from Dr. De Carro's publication, it appears, that the British Residents, and medical officers at Bagdad and Bussora, vie with the governors and medical establishment in India, in their endeavours to promote vaccination.

Dr. De Carro's work is published in French; he is about to publish another edition in the German language; in which an account of vaccination in Moldavia will be added. The Hospodar of Moldavia has sent him a present of a very handsome Indian shawl, in return for his Treatise.

An extract, which I some time ago published in this Journal from Dr. De Carro's work now under consideration, and letters which I have since received from him, concur in proving, that the hypothesis of an anti-pestilential virtue in vaccination may be considered as perfectly exploded. Dr. Struve of Gorlitz, fondly imagined that he had found the practice a preservative against the scarlatina; but this opinion, as well as that once entertained by some persons in England and France, of its being a preservative against the hooping-cough, is totally destitute of foundation.

In the Bombay Gazette for July 2, 1802, is a letter from Drs. Moir and H. Scott, giving an account of the introduction of vaccination into India; and accurately describing the vaccine vesicle as it appears there. By this description, it is evidently of the genuine kind. Due acknowledgments are also made of the services rendered by the Earl of Elgin and Dr. De Carro; to whom the public are under great obligations for transmitting the virus to India.

Dr. De Carro alludes to the case of Count Mottet, which is well known in the annals of vaccination; and observes, that the physicians of Bombay entertain a more correct opinion of the nature of this case, than the generality of medical men in Europe; who think that a person who has had the small-pox cannot have the genuine cow-pock. Dr. De Carro admits it is difficult to give the genuine disease to those who have had the small-pox; but maintains, from his own experience, that although you can but rarely excite the true vaccine vesicle in a person who has had the small-pox, it is not impossible. In this respect he coincides in opinion with Dr. Jenner.

Several instances of genuine cow-pock after the small-pox are related in my Treatise on the Cow-pock. Of the reality of such cases, no stronger proof can be required, than that matter taken from them should be capable of propagating the genuine disease. One well known case of the kind is that of Mr. Rooke of Jamaica; another is that of Mr. Tanner, published in the fourth volume of the Medical and Physical Journal.

Dr. De Carro wrote to Dr. La Font, desiring to know whether the plague ever attacks those who have the small-pox, or those who have had that distemper. The answer he received was, that the small-pox, whether a person at present labours under the disorder, or has had it a longer or shorter period, is no preservative against the plague. Dr. La Font has known two persons have the plague and the small-pox at the same time. Those who attend people in the plague, have known many instances of this kind.

Dr. La Font says, the plague has not been known to mitigate the small-pox. He observes, that infancy has been thought particularly disposed to receive infection; but at Salonica they have found it quite the reverse. He says, it has been held as a never-failing rule from all antiquity, that when the plague reigned, all other disorders ceased; but in the year 1793, when the plague prevailed there, the small-pox also raged with unexampled fury. Such were its ravages, that the Jewish nation at Salonica, consisting of twelve thousand, lost a sixth part of their number by that single disease.

Dr. Valli, after suffering severely from the plague, and proving in his own person the inefficacy of vaccination as a preventive of that dreadful distemper, went to Smyrna, and recommended inoculation of the small-pox as a preventive. This, Dr. De Carro justly observes, is the more remarkable, since he seems to acknowledge, that the small-pox is not a preservative against the plague but during the short time while it lasts, which is but a few weeks, and cannot be renewed.

Dr. De Carro concludes his work with a letter from Dr. Jenner, dated March 30, 1803. In this letter, Dr. Jenner observes, that as far as he had been able to learn, the species of rot in sheep, described by Dr. De Carro, was totally unknown among the flocks in Great Britain.

On the arrival of Dr. De Carro's intelligence, respecting the inoculation of sheep, I mentioned the circumstance to a nobleman who has a considerable estate in the county of Sussex; who said, he knew of no such disease as that I described.

described. I next inquired of Dr. Jenner, whether he had ever seen or heard of it? to which he answered in the negative. I asked him, whether he had ever taken any particular pains to investigate the subject? He assured me that he had made it a particular object of inquiry; and had frequently questioned the oldest shepherds on this point; but could never hear of such a disease.

I then caused an inquiry to be made of another person of distinction, who has paid particular attention to the improvement of the breed of sheep. His answer was, we have no knowledge of such a disease, as that described by Dr. De Carro and other foreign authors.

Still, however, it appeared to me highly improbable, that a disease which commits such dreadful ravages on the Continent of Europe, should be utterly unknown in Great Britain. I therefore consulted Layard, "*On the Contagious Distempers of Horned Cattle*," and was so fortunate as to find a reference to Fuller's *Exanthemata*, a work not so well known as it deserves to be.*

Under the head, "*Rittelen, or Chicken-pox*," we meet with the following remarks: "Sometimes they come alone; sometimes they have been seen sprinkled among the measles.

"It is said that poultry and turkies are subject to a disease coming out with red pimples, though not many; which soon dry up into scabs; but are not apt to leave scars or marks.

"Swine or hog-pox.

"Chesneau mentions a sort of pustules, *not differing much from the true small-pox. Many people mistake them for the small-pox; but they continue not so long, bring no danger, and leave no marks.* These, he thinks, cause many people to believe they have had the small-pox more than once.

* The following observation, p. 21, though not connected with medical science, is curious and interesting. "I can almost suspect, that our ce'lebrated Sir Isaac Newton might fetch the first hint of his notions of attraction and gravitation, from a little ludicrous Spanish book, entitled, *The Man in the Moon*."

"For, p. 46, it is said, 'I found by this experiment, that which no philosopher ever dreamed of, viz. that those beings which we call heavy, do not sink towards the centre of the earth as their natural place, but are drawn by a secret property of the globe of the earth, or rather, something within the same; in like sort as the loadstone draweth iron, within the compass of the beams of attraction.'

"He gives them no name; but I believe them to be what we call the swine-pox."

It is a mistake to affirm, that the swine-pox leaves no marks; but I am inclined to believe, with Fuller, that it is a different disease from the chicken-pox, and that the same person sometimes has them both. The swine-pock containing a more opaque fluid than the chicken-pock, it is not so apt to be broken; but turns about the fifth day, and is converted into a yellow scab. The scab of the small-pock is brown.

Fuller adds, "The small-pox, and its spurious sorts, are peculiar to man. Mr. Mather, indeed, in his letter from Boston in New England, says, that Dr. Leigh, in his Natural History of Lancashire, reports, that some cats were known to catch the small-pox; and pass regularly through it. He adds, We have had among us the same occurrence.

"But if we had seen and examined the matter, perhaps it would have been found a very different thing from the small-pox. For in like manner there was, about the year 1710 or 1711, upon the South Downs in Sussex, a certain fever raging epidemically among the sheep, which the shepherds called the small-pox; and truly, in most things, it nearly resembled it.

"It began with a burning heat, and unquenchable thirst. It broke out in fiery pustules all over the body. These pustules matured; and if death happened not first, dried up into scabs about the twelfth day.

"It could not be cured, no, nor in the least mitigated by phlebotomy, drinks, or any medicines or methods they could invent or hear of.

"It was exceedingly contagious and mortal; for where it came, it swept away almost whole flocks. But yet it could in no wise be accounted the same with our human small-pox; because it never infected mankind."

Ere I quit Fuller, I beg leave to observe, that he mentions an instance of the co-existence of the small-pox and the measles, published by Dr. Ridley. In my Treatise on the Cow-pox I have related a considerable number of instances of the co-existence of these and other eruptive diseases, contrary to the opinion then prevailing. These and almost every thing else of any consequence contained in that publication, a good-natured writer in the Medical Repository, published at New York, has ascribed to Dr. Coxe; although it is evident, by his frequent quotations from my book, that as much of it as was then printed, consisting of 750 pages, was then in his possession. Such
misappre-

misappropriations, however, and such unmerited compliments, are not confined to the other side of the Atlantic; and it would be easy to mention some very vain authors on this side of the water, who, if they were stripped of their borrowed feathers, would be as naked as when they came into the world.

While I was endeavouring to ascertain the nature of the murrain in sheep, Dr. Harrison's valuable Observations on the Rot fell into my hands, and confirmed the opinion I had before entertained, in consequence of the best information I could procure, that what Dr. De Carro describes is a different disease. Of this Dr. De Carro himself is since convinced. He was led into the error of supposing it to be the rot, by the vague manner in which the terms denoting the distempers of sheep are sometimes used.

Dr. Harrison, speaking of the rot, says, "It has been called the sheep-pox by Prof. Vibourg, of the Veterinary College at Copenhagen."

Dr. Harrison is inclined to believe, "That Prof. Vibourg and Dr. De Carro confound the rot with the *claveau des moutons*; which is a febrile and eruptive disorder. This complaint bears a strong resemblance to the small-pox. The *claveau* is a vague and indefinite term; it comprises the scab, and rot or *pourriture*, as well as the disease properly denominated *claveau*. These are very different affections, and ought not, as I conceive, to be included under one general denomination."

About the period when I perused Dr. Harrison's publication, I met with the passages alluded to in Layard and Fuller; which I thought worthy of being communicated in some popular channel; but, in order to determine that point with the greater precision, I first wrote to Dr. Harrison, to ask if he had ever heard of the sheep-pox in this country.

His letter, dated Nov. 20, 1802, is as follows:

"I was favoured with your letter a few days since, and shall have great pleasure in giving you every information in my power, relative to that curious disorder the *claveau des moutons*. After many inquiries, I have reason to believe that it is unknown in every part of this island. It differs equally from the rot, or *pourriture*, which is a complaint of the liver, without any eruption; and from the scab, or *la gale*, a chronic affection of the skin unattended with fever; though it has been improperly confounded with both.

"Indeed, the complaints of sheep are very little understood;

stood; and it gives me great pleasure to find, that you think them worthy of your consideration. My attention was accidentally called to the subject more than twelve months since; and hitherto I have prosecuted the inquiry, principally, from an idea that it will enable me to throw new light upon the disorders of mankind.

“ The *claveau des moutons* is a febrile and an eruptive disease. It resembles the small-pox in so many particulars that I am inclined, from analogy, to believe it may be superseded by cow-pock inoculation. If it were known in this country, I make no doubt that you, to whom the friends of humanity are under so many obligations, would soon favour us with much useful information, concerning the influence of vaccine inoculation over this virulent and dangerous malady.

“ Sir Joseph Banks has forcibly pointed out the great danger of importing the *claveau* into this country, with the Spanish sheep, which our breeders introduce for the improvement of their flocks. It is a subject of national importance, and the public are much indebted to Sir Joseph for the cautions he has recommended.

“ If the *claveau* once makes its appearance in Britain, we may have great difficulty in exterminating it from among us. I think, when sheep are first brought into the island, the importers should be obliged, under severe penalties, to keep them apart from all others, till they are satisfied that no danger is to be apprehended. By attending sufficiently to this precaution, we shall be in less danger of suffering from the ravages of a complaint, which proves fatal to so many sheep upon the European continent, and from which we have hitherto remained free, in consequence, I conceive, of our insular situation.

“ I thank you for your obliging inquiries about my little Treatise on the Rot in Sheep, and other Animals. It was inserted in No. 56, of Mr. Young’s *Annals of Agriculture*. I am preparing a new edition of it for the press; which I expect to publish some time next spring.

“ I am, &c.

“ E. HARRISON.”

On referring to the *Annals of Agriculture*, I met with much unexpected information concerning the sheep-pox; but finding that I was anticipated in my intention of being the first to announce that the disease has been known in England, I deferred writing any remarks on the subject, till,

till by further investigation, I should be able to add something to the stock of information already acquired.

In the work before mentioned, for the year 1803, p. 631, Sir Joseph Banks has published a caution to the importers of foreign sheep; in which he says, "This dreadful malady having made considerable ravages in many countries on the Continent, and certain individuals having of late years been in the practice of importing Spanish sheep; it well deserves their attention that such a distemper exists, and would, if brought into this country, prove a very serious misfortune.

"Fitzherbert mentions it as known in his time, (*Certain Ancient Tracts concerning the Management of Landed Property*, 1767, p. 41) and, under the name of *Claveau*. It is largely treated of in Carlier's *Traité des Bêtes à Lain*, quarto, vol. ii. p. 519. He describes it as being exceedingly infectious, and fatally destructive to flocks; spreading rapidly over a whole province."

In p. 632 of the same volume of the *Annals*, are the following observations "On the Pock of Sheep, by Mr. Westfield of Weenda.

"Though I believe I am pretty well acquainted with what has been written by English authors on the subject of husbandry, yet I do not recollect, in any of them, to have met with an account of the pock incident to sheep.

"From this circumstance I concluded that the disease was not to be found in England; and the more so, as a paper in one of the English journals, published about the year 1790, gives an account of the sheep-pock only from French writers on this subject.

"As to the nature of the disease, it bears the greatest resemblance to the small-pox of children. According to what we know and conjecture, it never makes its appearance but from infection; for I have always been able to trace its origin and propagation, in all cases which have fallen under my observation.

"The pocks always make their appearance after a fever, accompanied with a swelling of the glands. They appear as red spots; which gradually undergo suppuration; then they dry, and drop off.

"The disease has three periods; which, however, as to their duration, are not quite regular. From the moment of infection to the eruption of red spots, there are generally seven days. After this period, they require nearly the same space of time to arrive at complete suppuration.

"When this has taken place, the drying and falling off
succeed,

succeed; after a short space of time; but not seldom the disease terminates in malignant ulcers; which will last for several weeks. As it is no easy matter, in this case, to determine what is the pock itself, or only the consequence of the ulcers produced by it, the duration of this period becomes less certain.

“ The sheep-pock is a most ravenous disorder; where a flock is attacked by it, more than half of the sheep are destroyed; and the remaining part is generally unhealthy, and not fit for any farther use. According to my observations, the danger never appears in the two first periods; but constantly in the last, viz. in that of drying and falling off.

“ The pustules appear particularly on the naked parts of the body of the sheep; viz. on the belly, between the legs, and in the face. The parts covered with wool are, indeed, not free from being attacked; but such a case is less frequent, and less dangerous.

“ Of the naked parts, they appear most frequently in the face; upon and round the eyes and the mouth; as also in the cavity of the mouth, and the nostrils. Those round the eyes are apt to become confluent, and cause very malignant sores; so as to drive the eyes out of their sockets. When they occupy the parts round the mouth, they prevent the animal from taking any nourishment, and cause it to die of hunger.

“ Within the nostrils, they cause very considerable inflammation and gangrene. Those subsequent accidents appear to prove more fatal than the original disease; for in most cases the animals seldom die before the twenty-first day, on which the distemper terminates; but often from eight to twenty-one days after this period. Upon dissection, no pustules could be discovered in the internal parts.

“ The natural infection was not communicated to other sheep at any great distance; and I am inclined to believe, that it only takes place from immediate contact. My sound flocks remained free from the disease, at the distance of three hundred feet from those which were infected.

“ The virus retains its infectious quality a considerable time. A sound sheep introduced into a flock in which the disease had ceased for twenty-nine days, was infected.

“ Infection may be produced by different substances taken from the diseased sheep. I have inoculated with bloody lymph, with fresh purulent matter, and with scabs; and in all these cases, the pock was produced. The least quantity

quantity of the virus imaginable is sufficient to effect inoculation.

"It is now proved by pretty general observation all over Germany, that inoculation is the most effectual means of preserving the flock; of three hundred and fifty sheep, which I caused to be inoculated with the sheep-pox, not one has died, nor become unhealthy.

"Whether the cow-pock will preserve sheep from the sheep-pock is yet undecided. According to my own observations, the former does not apparently affect sheep; for which reason I have discontinued my experiments."

Having mentioned this object of my inquiry to Major Magra, from whom I received the intelligence I some time ago published in this Journal, concerning the pustulous disease of turkies on the coast of Africa, he told me, that Mr. Elman, who has the care of the famous South-Down flock belonging to Lord Viscount Hampden, is celebrated for his knowledge of the diseases of sheep; and kindly offered to write to the Hon. Mr. Trevor on the subject. From Mr. Trevor's answer, dated Glynd Place, Dec. 16, 1803, I derive the following information.

"There has been no appearance of the disease called small-pox amongst any of the flocks of this county, since 1762 or 1763. In that year most of the flocks in the western part of the county were affected with it, and lost great numbers.

"The symptoms were a great drowsiness, and an eruption of pustules, like those of the small-pox, in the face, and under the arms; which, in those that recovered, filled with a considerable quantity of matter, and afterwards turned to a dry scab. It left marks behind, which were visible as long as the animal lived. The old fat wethers suffered most.

"This disease came from the westward, and was communicated to the neighbouring flocks in the same Downs. Its source was not accurately traced.

"Those flocks suffered least, in which the affected sheep were separated as early as possible from the sound.

"The remedies employed are not now known."

One of the principal objects of this Memoir, was to give an analysis of Dr. De Carro's late publication; and, I apprehend, it will not be deemed inconsistent with that purpose, to add a few extracts from a letter I received from him, dated Vienna, September 8, 1804. It contains a testimonial relative to the Portsmouth cases, similar to those from other respectable quarters.

"Accept

"Accept my best thanks for the pamphlets which you were so good as to send me by Mr. Aveling. I was already acquainted with Mr. Goldson's work. I wish I could shew you the copy which was first sent to me. You would see the marks which I made with a pencil at almost all the same passages where I find your's, in the copy which I received from you.

"My opinion of his performance was, that he had been much too negligent in ascertaining the genuineness of his vaccinations; and that he laid too much stress upon the effects of his variolous inoculations. I looked on those he describes, as merely the consequence of a common cuticular inflammation; such as is produced by most kinds of morbid matter; which sometimes, though rarely, excites a fever.

"It appeared to me, that the whole pamphlet shewed much less information upon vaccination in general, than any man who undertakes to write against a practice sanctioned by the whole world should possess; and I could not help entertaining suspicions concerning the author's partiality for the practice, when I found that so late as the year 1802, he continued to inoculate for the small-pox.

"How any man who understands vaccination, can still continue to practice inoculation for the small-pox, is to me absolutely inconceivable. We see no such thing at Vienna. No practitioner seems to recollect that the inoculation of the small-pox ever existed. If any one wished to revive the practice, it may be doubted whether he could find parents who would permit it; or matter to accomplish his design. I have no doubt, however, but the title of Mr. Goldson's pamphlet must have done some mischief; but I trust, your able answer will diminish its effect.

"You have afforded me the greatest pleasure possible, by giving me an opportunity of reading Mr. Anstey's elegant Latin Ode. It is a rare thing, in our days, to meet with such classical Latin."

After speaking in flattering terms of the translation of that Ode, Dr. De Carro concludes in the following manner; alluding to an expression in my answer to Mr. Goldson, he says, "You will, perhaps, be offended with me; *equo credo; lympham equinam quotidie insero, illamque in ditiores Austriacas, innumerasque alias regiones Europæ et Asiæ, sine metu spargo.*

"Dr. Sacco sent me, last year, two sorts of equine matter; one taken immediately from a horse labouring under *giardoni*; the other from the same source, but already reproduced

duced in several human subjects. *Vale, et ama Doctorem De Carro, vaccinatorem et equinatorem; sed nunquam, sicut medici et chirurgi Portus Magni, variolarum insitorem.*"

I am, &c.

New Street, Hanover Square.

JOHN RING.

To the Editors of the *Medical and Physical Journal*.

GENTLEMEN,

HAVING been requested, both publicly and privately, to give my opinion of the preparation of the *Lichen Islandicus*, recommended by Mr. Reece in his pamphlet on that subject; and believing that a valuable article of the *Materia Medica* may become inert by improper administration, I have complied with the request.

Mr. Reece condescends to agree with all the celebrated physicians of the North, whose authorities I had quoted respecting the virtues of the Iceland moss, in pulmonary consumption; he also agrees with me, that it should be copiously administered; but he condemns at the same time the mode prescribed for employing it, and prefers his own powder or *farina*. This preference is the point which I am now called upon to consider.

He says, p. 3, of his pamphlet, "The bitter portion of this herb (which must be considered the principal agent in the relief of the phthisical symptoms) is readily imparted to boiling water by infusion; but by the long boiling necessary to extract its mucilage, this quality is nearly destroyed."

This assertion is the very reverse of the truth in every respect; the great virtues of the lichen are contained in a mucilage of a peculiar nature, which is rendered the more effectual by its combination with a bitter principle. I have pointed out, in pages 20, 21 and 22 of my work, the difference between this mucilage and all others hitherto known. This bitter principle does not evaporate by boiling, as Mr. R. erroneously supposes; a continued and uniform boiling is, on the contrary, necessary to extract the virtues of the plant. Cramer, Reiske, Ebeling, Schöneyder, who have all ably written on this vegetable substance, of which they have given different analyses, are of the same opinion. I shall say nothing of Mr. Reece's objections

objections to all the preparations of the plant: judgment alone, without any practical knowledge, is sufficient to refute them.

"This preparation of *farina*, (says Mr. R.) is free from the cortical and fibrous part of the herb. It possesses, *in perfection*, both the medicinal and dietetic properties."

Where does Mr. Reece find that the cortical and fibrous parts have nothing to do with the virtues of the herb? Upon what authority does he advance an assertion so contrary to all the facts hitherto known? After assuring us, p. 7, that his preparation possesses, *in perfection*, both the medicinal and dietetic properties, he tells, p. 9, that, "If the phthical symptoms should indicate the use of the bitter quality of the lichen, *a greater proportion* than that contained in the *farina*, a concentrated infusion may be made by infusing three ounces of the plant, &c."

We must admit that Mr. R. might have been more consistent, had his partiality for his *farina* allowed it.

Mr. R. is not less apprehensive for the loss of the virtues of the lichen by ebullition, when given as medicine, than when administered as food; for which reason he carefully *avoids* much boiling. But he should know, that the constituent principles of the plant are extremely compact, and so strongly united together, that a considerable degree of boiling is necessary to render it susceptible of being decomposed in our system, and the nutritious part extracted from it. Mr. R. like many others, does not sufficiently discriminate between what is digested and what passes through the body; many vegetable substances are dissolved and absorbed by the whole absorbent system of the intestines, which is called the solution of the aliment, but not its true digestion. An aliment is digested only in as much as it is decomposed, transmuted, and its dissociated elements attracted, each by affinity, to repair the different solid and fluid systems. When, therefore, a vegetable aliment is introduced into the animal economy, without being decomposed, reduced to its elements, and appropriated or assimilated, it is only dissolved, and retains a part of its basis, which is a substance heterogeneous to the animal frame, and incapable of supplying the blood with the necessary principles.

Mr. R. will possibly refer us to the Icelanders, who habitually use the *farina* of lichen; but the ordinary food of that people is composed of gross aliments, which the inhabitants of our towns could not digest like the Icelanders, accustomed to hard labour, and to live in the open and keen
air,

air, which furnish the blood with the necessary elements that raise the digestive faculties to their greatest height. But how could the digestive juices of our citizens, particularly of those who are weakened by disease, decompose this farinaceous substance, the extremely compact elements of which can only be disunited and rendered capable of assimilation with our fluids, by a preparatory decomposition? Besides, in the different modes of preparing this farina, the Icelanders submit it to a much longer boiling than Mr. Reece.

The above considerations have induced me to combine the Iceland moss with other substances, to be given as food; and with this view I make it undergo a preparatory elaboration, to render it more capable of assimilation with the different systems of the human economy.

I presume what I have said will be sufficient to demonstrate, how much Mr. Reece has been mistaken respecting the use of this herb, both as a medicament and as an aliment.

I now conclude this letter, which I fear is already too long, by referring your readers to the *Medical and Physical Journal*, for January, 1804, where other mistakes of Mr. R. are noticed, and of which I have made no mention above.

I am, &c.

Oct. 14, 1804.

J. B. REGNAULT, M. D.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

IN your very useful publication for August, 1803, you favoured me with the insertion of the case of Francis Otter; on which I proposed to furnish some pathological observations in a future number. Different circumstances prevented the completion of this design for a considerable time, during which the external appearance of the tumour has become so much changed, that the reasonings, formerly made, on the cause and origin of the disease, might now perhaps be scarcely considered to apply. I therefore laid aside my intention, until a more minute inquiry might confirm or destroy the opinions I had formed on the subject; which examination, the daily expected death of the patient promised to allow. But being, by the friendly assistance of Mr. Hartley, furnished with a drawing of the tumour in the present state, I have enclosed it, together with a short account of the progress of the disease during

(No. 69.)

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the twelve months which have elapsed since my last communication. At the date of the former account, July, 1803, it was observed, that the tumour was very much reduced, though some discharge continued; that this was probably only kept up by exfoliations about to take place, at the evacuation of which, it was to be expected that the sores would heal. This expectation was supported by the frequent escape of small pieces of bone, some in a boney, some in a cartilaginous state. After some time, small cysts arose on the surface occupied by the tumour, some of which, on being opened, discharged a gelatinous fluid, not uncommonly mixed with a half solid substance, appearing formerly to have been bone. These cysts continued to multiply, and when left to themselves ulcerated with frequent and considerable hæmorrhage, leaving unpleasant and painful sores. Still the patient maintained his strength, his appetite being unimpaired.

The annexed drawing may furnish some idea of the present appearance of the parts, and if compared with the engraving published in your Journal for August, 1803, will show, that the space now occupied by the various cysts is little less than that formerly filled up by the uniform tumour. The cysts, when examined by a probe, are found to communicate with each other; but the frequent occurrence of hæmorrhage has of late forbidden any very accurate investigation. On the right side of the drawing will be seen two sores, remaining from cysts lately ruptured; the centre shews a deep sulcus, from whence there is a constant discharge of ichorous matter, and not uncommonly of blood: below are small mammary projections about to be the outlets to the cysts beneath them.

Having stated thus much in explanation of the drawing, allow me to call your attention to the origin, and thence to the probable cause of the tumour; in the progress of which, I conceive, nature has exhibited some of her most wonderful exertions. By reference to the first communication on this subject, it will be found, that the original injury was the fracture of a rib in a subject very far advanced in years. The accident was neglected, and an irregular callus was formed; a small tumour was observed to follow the immediate infliction of the injury. This tumour, I suspect was occasioned by a partial division of the intercostal artery, which pouring out blood at the time the process of adhesion and consolidation of the rib was going on, formed to itself a cyst. This cyst was for a short time stationary; but blood constantly flowing into it, produced an increase of bulk, from whence pressure on the surrounding parts was produced, and the consequence of pressure

was

was absorption. These several actions continued until the integuments were extended so much beyond the usual bounds, as to occasion the tumour first described, and ultimately to give way. Since that event, the irritation of different detached portions of ossific matter, and the effort to expel them, has occasioned the present tubercular appearance of the surface. Is it not a striking illustration of one of the laws of Nature, that in the progress of this tumour, all the effort for evacuation should be externally, and not through the peritoneum?

I am, &c.

Grantham, Lincolnshire, Sept. 13, 1804.

B. LEESON, Jun.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

IN the long paper I sent you a few days ago, I ventured to offer my doubts on the accuracy of the conclusions so positively formed by some medical men on the Case in Fulwood's Rents, (p. 384); and my scepticism is not lessened by the circumstances of a Case, which has occurred at the Central House within the last twelve days.

The history of it will need no comment. On the 12th instant, an alarmed mother came to me with her infant. "Sir, I have left a child at home that has been ill for some days, and now the small-pox are coming out; what shall I do for this infant? they have slept together all along, and I am afraid it may already have it in its blood." Let me inoculate it, by all means; if the child be not already infected, the inoculation will prevent it; if infected, it will arrest the progress of the dreadful disease, and lessen its sufferings and the danger. Of the certainty of this I have continual experience; for when the small-pox breaks out in any corner of this metropolis, mothers from such neighbourhood, come flocking to me with their children; those not yet infected escape; those infected have it mildly, the vacciolous vesicle in such instances exhibiting its characteristic appearances without apparent diminution.

Yesterday the mother presented her infant with a complete areola on each arm; and was assured, that it was secured to her. The poor woman had piously hung over her other child till, dying in her arms, it had left on her afflicted countenance the marks of that disease which closed its eyes in death. On her grief and vigil-worn

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cheek, to which she had fondly pressed her suffering child, two large variolous pustules presented their hideous figure. What a lamentable thing that the other child was not inoculated! "Sir, I was quite easy about its safety; for some time ago it had a very great eruption; and no less than four doctors assured me that it was the small-pox."

Address of the protected child.—Richard Thomas, No. 6, Dorrington Street, Brook's Market; aged one year, three months.

Salisbury Square, 23 r, 1804.

JOHN WALKER.

*Account of Diseases in an Eastern District of London,
from September 20, to October 20, 1804.*

ACUTE DISEASES.		Chlorosis - - - - - 3	
Typhus - - - - -	2	Menorrhagia - - - - -	2
Ephamera - - - - -	3	Vermes - - - - -	3
Dysentery - - - - -	4	Ischuria - - - - -	2
Rheumatismus Acutus -	2	Rheumatismus Chronicus	17
CHRONIC DISEASES.		PUERPERAL DISEASES.	
Tussis - - - - -	11	Menorrhagia Lochialis -	5
Dyspnœa - - - - -	4	Dolores Post Partum -	6
Tussis cum Dyspnœa -	9	Ephamera - - - - -	8
Pleurodyne - - - - -	3	Abscessus Mammæ - -	2
Phthisis Pulmonalis -	2	Hæmorrhoids - - - - -	1
Gastrodynia - - - - -	6	INFANTILE DISEASES.	
Dyspepsia - - - - -	7	Diarrhœa - - - - -	12
Hypochondriasis - - -	4	Aphthæ - - - - -	5
Hydrothorax - - - - -	4	Tinea - - - - -	2
Ascites - - - - -	3	Vermes - - - - -	3
Diarrhœa - - - - -	17	Ophthalmia Purulenta -	2

The diseases which usually occur at this season of the year prevail at present to a considerable degree. Complaints of the stomach and bowels are now very general.

Diarrhœa and dysentery have more frequently occurred than cholera. The first of these indeed may generally be considered as a salutary effort of the constitution to throw off something by which it is oppressed, and is very seldom productive of any serious consequence.

Though it may be necessary to restrain it within proper bounds, yet too early an interference is often injurious. Dysentery, though a distinct disease, has, sometimes, been so nearly connected with diarrhœa as to be mistaken for a continuance of the same disease. In the dysentery, though there is a frequent inclination to go to stool, the quantity discharged is very small, and consists chiefly of mucus or
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of mucus and blood. Some degree of fever usually attends the disease; but it will sometimes continue, in a chronic kind of state, for a considerable time after the fever has subsided. The solution of this disease is generally promoted by the discharge of fæces; and those medicines which have been employed, perhaps with some other intention, have proved useful, in proportion as they have promoted the evacuation of fæculent matter which has been retained in the colon.

CRITICAL ANALYSIS

OF THE
RECENT PUBLICATIONS
ON THE

DIFFERENT BRANCHES OF PHYSIC, SURGERY, AND MEDICAL PHILOSOPHY.

Schola Medicina, or the new Universal History and School of Medicine; translated into English from the original Edition, by W. ROWLEY, M. D. &c. &c. 1 vol. 4to. pp. 314. London 1803.

THIS extensive work, which cost the industrious author the principal part of his medical leisure during the last twenty years, contains the following parts or subjects, viz. Introduction, History of Medicine with Errors of Medical Sects, Osteology, Myology, Angiology, Neurology, Splanchnology, and a Compendium of Physiology, Pathology, and Symptomatology.

The *Introduction* contains a brief Synopsis of the original Edition, and a general explanation of the plates, which are numerous, and well calculated to elucidate the different subjects of the work.

In the history of medicine, Dr. R. appears to have paid great attention to the opinions and practice of Hippocrates, which he details under accounts of his anatomical knowledge, his theory of generation, his medical practice, his materia medica, the diseases of women and children, his midwifery, and, lastly, the surgery of Hippocrates, for at this time all these branches were professed by the same person. As we think a short account of this great man's practice in medicine will gratify many of our readers, we shall subjoin it. "In general, his practice is to keep his patients on the water gruel plan: to wait patiently, and watch diligently, for whatever course nature may take to expel the disease, in which salutary purpose he assists. Although his most common remedies are emulsions, hydromels, thin farinaceous ptisans and oxymels; yet, when necessary, he employs bleeding, purging, vomiting, and sweating."

The following Abstract will shew his use of particular remedies, as well as the state of the materia medica in his time.

"BARLEY WATER, HYDROMEL, AND OXYMEL.—In acute diseases, and in epidemic fevers.

CASTOR AND MYRRH.—For the diseases of women, obstructions, and hysteric affections.

ACETUM.—For sore throats, ardent fevers, vomitings, phrenzy, peripneumony, pleurisy, inflammations, and viscidities.

GARLICK.—For cold phlegm, and inflammations of the lungs.

ALLUM.—To cure hæmorrhages, check uterine discharges, and strengthen the uterus, &c.

SPICES—To promote the menses, and cure phlegmatic diseases.

FRESH OX GALL.—As a laxative to kill worms, for purging suppositaries, and uterine pessaries.

CANTHARIDES.—In dropsies, and to promote the urine, and menses.

DIET OF ONIONS.—For the jaundice, and to promote conception.

LONG ABSTINENCE FROM FOOD.—In dropsies, jaundice, diarrhœas, gouty, or rheumatic pains, asthmas, and disorders of the lungs and spleen.

CLYSTERS.—For pains and overfulness in the head, dry, hot, and windy cholics, pains of the womb, abdomen, pleurisy, fevers, pains of the loins, &c.

CUPPING.—For pains in the head and eyes, bruises, peripneumony, pains of the hip, and other parts.

ELATERIUM—To purge bile, expel the fœtus, or purge in cancers, ulcers, jaundice, sore throat, &c.

FRICTIONS.—With oil, to strengthen weak joints, and relax stiff ones.

COLD BATH.—For faintings and hysterical fits, to restrain the menses, prevent miscarriages, rheumatic pains.

TO BE AVOIDED.—In diseases of the lungs, as asthmas, coughs, consumptions, &c. diseases of the liver, and tabes dorsalis.

JUNIPER BERRIES.—As a powerful diuretic, to provoke the discharge of urine,

ASSES MILK.—In excessive fluxes from the bowels or womb, for slow fevers, consumptions, and diseases of the lungs.

LINSEED.—In wounds and ulcers, and outwardly in emollient anodyne fomentations.

SOUR APPLES.—To be made into drink for fevers.

MECONIUM OR POPPIES.—For excessive fluxes, and pains in the uterus.

HONEY.—For fevers and inflammations as a resolvent. As a pectoral in coughs, and a laxative in clysters.

MINT.—A stomachic and cordial for vomiting, jaundice, and weak stomachs.

MYRRH.—For most disorders of the stomach, for obstructions of the menses, and to cleanse ulcerations in the mouth and gums.

NITRE FROM EGYPT, MORE LIXIVIOUS THAN OURS, OF A RED COLOUR. **DIASCORIDES.**—For sore throats, pleurisies, gouty and rheumatic pains, to purge phlegm from the bowels, water in anasarca, for the schirrus womb, and indurations in general.

ORIGANUM OR THYME.—For cold phlegm, dropsies, jaundice, and all sluggish indolent diseases.

EGGS.—Their whites to be given in fevers not ardent, in the drinks, and their yolks for coughs in children, excessive uterine fluxes, and all weaknesses, or relaxations.

POPPY JUICE.—For hysteric pains, and convulsive disorders, hectic fevers, diarrhœa, and dysentery.

TAR.—Inwardly for ulcers, to expel water from the womb.

PEPPER.—Outwardly for the tooth ach, and for convulsions, or cramps.

CERUS OF LEAD.—For disorders of the eyes, skin, and sharp ulcerations.

PENNY ROYAL.—For fevers and hysterical diseases, and the diseases of women in general.

GALBANUM.—Recommended as an expectorant and promoter of uterine discharges.

REZIN OF TURPENTINE.—For inward ulcers, and excessive fluxes, and uterine diseases.

ROSE LEAVES.—For a diarrhœa, diabetes, and relaxation of the uterus, fluor albus, &c.

ELDER BERRIES.—To purge in dropsies and uterine diseases.

SCAMMONY ROOT AND JUICE.—To purge in the sciatica, nephritic complaints, and chronic diseases.

SQUILLS.—To purge in uterine complaints, and to be taken in consumptive cases.

TAPPING.—For a dropsy and *empyema*.

WHEY DRINK.—For the cure of ulcerations, consumptions, fever, and the gout.

ASSA FETIDA.—For hysterics, peripneumony, pleurisy, jaundice, and a very large dose to purge bile.

SULPHUR.—For ulcers, diseases of the lungs, and cutaneous disorders.

FRANKINCENSE.—For ulcerations, puerile asthmas, stomatic, and uterine complaints.

It does not appear, that Hippocrates gave powerful narcotics, to procure sleep; though in some few passages of his book, of the disorders of women, he speaks of the juice of poppy, as conducive to the cure of what we now call hysterics. He likewise takes notice of mandrake, but cautions against giving it in quantities, sufficient to cause madness; and he mentions much the same of henbane.

As to baths, suffumigations, fomentations, incisions, and gargarisms, he seems to have been perfectly well acquainted with their efficacy, and the proper seasons and manner of using them. He lays a particular stress upon ointments, but no where mentions plasters. Instead of these he frequently recommended cataplasms, in cases where, even we, perhaps, might find them preferable to plasters.

When bleeding, and the use of purgatives, which were his general means for diminishing the superfluity of blood, or humours, were

not sufficient, he then had recourse to diuretics. This he seems to insinuate in his work *De Ratione Vict. in Acutis*. All diseases terminate, or are cured by evacuations, made either by the mouth, belly, the bladder, or some other outlet; but sweat is common to all diseases, and equally terminates all. For these purposes, he sometimes ordered a bath, at other times sweet wine, garlic, onions, leeks, cucumbers, melon, citruls, cysticus, both sorts of apium, fennel, maidenhair, and night shade, as well as all acid substances. These several remedies he directed in various chronical disorders, after purgation, when he believed the blood to be still loaded with ichor. In some cases he excited a diaphoresis, but does not inform us how he produced it."

"His sentiments of the manners of a physician are worthy of attention. He says, he ought to dress decently, to be grave in his manners, moderate in his actions, chaste and modest in the conversation he is obliged to have with women; no idler, ready to answer every body with candour, sober, patient, always ready to do his duty, without disturbing himself; and he thought it requisite, for the credit of the physician, that he should have a *healthful look*, and a good complexion; for men are apt to suspect him who has not his own health, to be scarcely instrumental to procure another's.

But what he is justly entitled to admiration for, by practitioners in medicine, is, his generous acknowledgement of his mistakes, and ill success. A remarkable instance we find recorded in the fifth book of his *Epidemics*. For being called to Antonomous, who had received a wound in his head, he unfortunately mistook the wound for one of the sutures, and neglected trepanning him. Some days after, the patient being seized with a great pain in his side, and convulsions in both arms, he was sensible of his error, and tried the trepan, but in vain; for it being the fifteenth day, and the summer season, the patient died the next day.

This candid declaration of his ignorance being the cause of a patient's death, must be admired in all ages; but how few follow his steps in this particular! how eager we are for publishing our success, and how silently we draw a veil over our blunders! This great author desired of the gods, in recompence of his labour, neither riches, nor pleasure; but a long life in perfect health, success in his art, and to render himself famous to posterity. This desire of his, is declared in his oath; and it was accomplished in its full extent; for he lived one hundred and nine years, in soundness of mind and body. He succeeded so well in his art, that he has ever been regarded as the founder of it. He is to physicians, what Homer and Demosthenes are to poets and orators. He received, during his life, such great honours, as were never bestowed on any mortal. The Argians erected a statue of gold to his honour, and the Athenians decreed a crown of the same metal; passed an act, that himself and descendants should be maintained in the Prytaneum; and they initiated him into the great mysteries, an honour rarely conferred on strangers, and never before on any but Hercules;

Hercules ; and he has left behind him, in his works, an immortal reputation ; for he has been always considered the original interpreter of Nature ; and it is highly probable he will ever preserve his glory, which above two thousand years have not yet robbed him of. And though, even now, some designing professors make a point of obscuring the brightness of his fame, by unmeaning sneers, and dark insinuations ; yet we are of opinion, that our ancient author will revive, and receive additional lustre, when the works of such men perish, and are lost in that oblivion they justly merit. This excellent man died in Thessaly, in the second year of the hundred and seventieth olympiad, three hundred and forty-nine years before the birth of Christ, and was buried between Larissa and Gortona."

(To be continued.)

Experiments proving Vacciolation, or Cow-Pox Inoculation, to be a permanent Security against Small-Pox ; with Facts and Remarks.
By SAMUEL HILL, Surgeon, Town of Portsea, and Surgeon in the Royal Navy. 8vo. pp. 47. Portsea, 1804.

IT must afford peculiar satisfaction to the advocates for the Jennerian Inoculation, that in that quarter where its failure was supposed to have been detected, the most lucid proofs of its efficacy, when carefully administered, have been exhibited. In this pamphlet, dedicated to the President and Members of the Royal Jennerian Society, the cases, perspicuously detailed, very completely establish the position of the title.

" Vacciolation," says the author, " has been found to be, beyond dispute, a permanent prophylactic against variolous infection ; the immense mass of evidence, collected in England alone, and laid before a committee of the House of Commons, by the first medical characters and other men of science, in the United Kingdom, and upon which that committee decided, is sufficient to stamp its value without the aid of foreign testimonies. It may however be remarked, that it is now practised in most parts of the known world, with an astonishing success : in short, in all the quarters of the globe, respectable medical men, as well as other philanthropists, are humanely extending its benefits to thousands ; many of whom might otherwise fall victims to the greatest enemy of the human race, the small-pox.

" I commenced the new practice December 5, 1800, and from that to the present period have vacciolated two hundred and thirty, not one of which number has ever taken the casual small-pox, though exposed to its effluvia in all possible ways ; many of them having been in contact repeatedly, and even put into the same bed with those who had the confluent small-pox so bad as not to survive that dreadful and truly loathsome disease."

" To extreme care in the choice of vacciolous matter, and particularly in vacciolation, with an attentive observance of the progress of the vesicle, areola, &c." Mr. Hill attributes the success he has had. " At all times when in my power, I had the subjects to be

be vaccinated carried to the houses where those resided, from whom I was to take vacciolous matter; and this always on the eighth day or early on the ninth from vaccination; I do not recollect ever using matter taken before the former period or after the latter."

Considering the promptness with which some gentlemen resort to experiments, with doubtful matter, on subjects not yet protected, we cannot withhold the following accounts; nor refrain from observing, that the last case of the author's is unhappily not the only one on record of 'wisdom at one entrance quite shut out' by the variolous inoculation.

"Before I proceed to relate the experiments, I will beg leave to mention some unfortunate cases of small-pox, which I have witnessed in the course of my practice.—In 1797, I was desired to visit a female child in St. James's Street, Portsea, who had the casual small-pox of the confluent kind, very full; and she was altogether so ill as to allow me to pronounce a very doubtful prognostic. The parents informed me that there was a pustule on the left eye, on which account *only*, they wished my advice. On examination the seventh day from the first appearance of the eruption, I discovered a pustule, fully matured, on the pupil: I told them, that if the child escaped with life, she would certainly lose the eye; as I conceived it had (the pupil) already suppurated: they said, that if I could not promise to preserve the sight, I need not take the trouble of repeating my visit; but, in the course of eight hours afterwards, they again sent for me in haste, and shewed me the remains of the pupil on a piece of paper, which had been forced out of the orbit in a fit of coughing. This child escaped with life: the tunica albuginea, seemed, after a time, to fill up the vacuum occasioned by the loss of the pupil and iris, which last had also suppurated: the child had a most ghastly appearance.

"I was desired to visit a child of Mr. Palmer, of Hanover-Street, Portsea, in 1799, aged ten years: I found her with symptoms of fever, which ran so high, and the head was so much affected, that I apprehended she would not live till morning, if she was not relieved by an eruption. Some blood was taken from the arm, and the bowels opened by an aperient cathartic, and she was put into the warm bath; the day after, July 7, eruptions appeared, which soon proved to be small-pox. The feverish symptoms now abated, and the head, comparatively speaking, was well. About two hundred pustules matured, three or four of which came on the pupil of the left eye, which occasioned the loss of it.

"The daughter of Mr. Hatfield, then about eighteen months old, was taken ill in the summer of 1803, with feverish symptoms, which proved to be small-pox. I was asked to see her on the eighth day of the eruption; a pustule appeared on one of the eyes: the child had the disease very light, but had the appearance of violent ophthalmia. Every thing was done to moderate the local inflammation, which was treated the same as if the small-pox had been out of the question; but without obtaining the desired end:
the

the pupil suppurated, and was discharged in the shape of pus. This poor child is now living, and whenever I see her, I lament that she had not been previously vaccinated.

"I was desired to see the infant daughter of Mr. Bruce, Half-way-houses, Portsea, the seventh day after the small-pox appeared. She had been inoculated by a woman, and over the whole surface of the skin I could not reckon more than thirty pustules; and very unfortunately one of those came on the pupil of one of the eyes; the loss of the sight of which was the consequence. To these unfortunate cases, a long catalogue may be added, exclusively of those who have died of the small-pox. In the course of my diurnal visits to different parts of the island of Portsea, I frequently meet some of the children who are subjects of the preceding cases, which never fail to bring to my mind the unbounded goodness of the Deity, in furnishing an antidote to this pestilential disease, through the great and truly philanthropic Dr. Jenner. Contrasting the mildest state of variolation, or small-pox inoculation, with vaccination, there is a great balance of good, in favour of the latter, which neither occasions death nor loss of sight; nor does it produce scrophula, or any other complaint likely to render life unpleasant: and if I here allow, for argument's sake, (for on no other principle can I allow it) that the cases lately brought forward as failures, are really so; considering the little inconvenience which attended the subjects of them, and the few eruptions which were produced, still it would not make against the general practice of vaccination: for I beg leave to ask, where is the fond parent who would not with extatic delight court vaccination, for his or her, perhaps, only child, to ensure so mild a kind of small-pox, and thereby escape all the horrors and deformities of those children, whose cases I have just related? I would add, that in my opinion, if all the cow-pock cases, in these towns, from 1800 to the present time, were failures, they could not make much against the new practice—it would, comparing these towns, to all others where it has been crowned with such astonishing success, appear but as a single drop of water compared with the ocean, or as an atom of matter to the globe itself."

After this exhibition of some of the dire effects of small pox, which fell under the author's immediate notice, he gives some appropriate extracts from Dr. Tytler's translation of the *Pædotrophia* of Scevole de St. Marthe.

The ten experiments instituted by Mr. Hill between three and four years after vaccination, had nearly the same results as those of Mr. Creighton and the other gentlemen we have mentioned in our late Numbers.

"In all the preceding experiments, it is remarkable that very early inflammation took place; and that the punctured part rose above the surface of the skin in twenty-four hours after the insertion of the matter. In Mr. Gain's child, as early as twelve hours from variolation, inflammation and elevation had both taken place. Itching was more or less troublesome in all the experiments: and much more so than ever I saw in small pox inoculation.

tion. This early inflammation served to confirm me in my opinion, that their habits were impervious to variolous matter in the way of inoculation; and their resisting the casual small pox, certainly proves that they were rendered insusceptible of it, by the previous vacciolation. Nature, by promptly assembling her forces, at the very point where the enemy had assailed her, shewed that she was determined he should not enter her dominions: she therefore wisely carried on the contest at a distance from the capital, and the enemy experienced a defeat at the very place where he had hoped to gain a victory.

"The inflammation and punctures in all these experiments were of a darker colour, and had a harder feel, than in common small pox inoculation; the hardness was always longer going off than either inflammation or eschar. I have no doubt that I could, with lymph from the punctures, have given the small pox to any one susceptible of that disease.

"Having now completed these experiments, I shall hereafter hold it imprudent to variolate after vacciolation; and I shall decline in future putting my young patients to that test, except at the particular desire of parents; for it has been proved by experiments heretofore, as well as lately made, that morbid matter, and particularly the variolous, cannot always be introduced between the cuticle and cutis with impunity. If vacciolated persons will resist the casual small pox, which there can be no doubt of, it is quite sufficient.

"I will relate a case which occurred in 1801, which greatly tends to recommend the general practice of vacciolation, and particularly under similar circumstances.

"I was called to a poor woman in Havant-street, named Perkins, who had that same day only arrived from Plymouth in one of his Majesty's frigates, on board of which her husband served in the quality of a quarter-gunner. The poor creature fell in labour in the course of four hours after she took possession of her lodgings, and of course no accoucheur had been provided; nor indeed any preparation made for the event; in less than an hour the infant was born. Having retired into another apartment, I was much hurt on re-entering the bed-chamber half an hour after, to find her in tears. Upon enquiring what the cause was, she said that she was no sooner out of one trouble than she had fallen into another, for a child was lying dead in the next room, and another extremely ill, both of the small pox. She then asked me to inoculate her infant from the surviving child; it had the confluent small pox very full indeed, and being the month of July and very warm, I told her I thought she had better not think of it. I then mentioned cow-pock inoculation, and recommended it as likely to preserve the life of her infant; she consented, and it was immediately vacciolated (with matter taken from Mr. Purver's child the preceding month) before it was an hour old. It went through the progress with the greatest regularity; the eschar did not fall off till more than five weeks from vacciolation, and a beautiful characteristic mark was left on the arm.

Medical and Physical Intelligence.

PLAN of the ROYAL SUSSEX JENNERIAN INSTITUTION.

I. THAT as his Royal Highness the Prince of Wales has been graciously pleased to honour this institution by his patronage, it be denominated "The ROYAL SUSSEX JENNERIAN INSTITUTION," for the Extermination of the Small-pox.

II. An annual meeting of this Institution is to be held on the day appointed for the meeting of the Agricultural Society at Lewes.

III. A subscription of five guineas at one payment, or of one guinea annually, constitutes a Governor; and a Governor is entitled to recommend patients for the benefit of this institution.

IV. A Board of Directors shall be formed, consisting of a President, Vice-President, and 24 Members, who are Governors of this Institution, and not of the Medical Profession, five of whom shall be a quorum; one third of this Board shall go out annually, and the vacancies shall be supplied by lot, from the list of the Governors. They shall meet annually, at the above mentioned time, or oftener if expedient, to take into consideration the general interests of the Society, and to receive the reports of the Medical Council. This Board shall be empowered to frame laws and regulations, by which the Institution shall be governed; and they shall order the Trustees to pay such monies as shall appear to have been expended in forwarding the views of the Institution.

V. Trustees shall be appointed by the Board of Directors, who shall manage the pecuniary concerns of this Society, and order the Treasurer to make the necessary payments; they shall examine the Treasurer's accounts, previous to their being laid before the general meeting, or oftener if deemed expedient:—they shall be empowered to invest in their own names, for the use of this Society, such sums in the public funds, as shall be unappropriated by the Board of Directors.

VI. Mr. Whittfield is appointed Treasurer, who shall be empowered to receive subscriptions for forwarding this Institution; he shall keep a regular account of receipts and disbursements, and lay such accounts before the Trustees at least once a year, and oftener if deemed necessary; and he shall pay monies upon the order of the Trustees, giving in writing.

VII. A General Court may be convened by five Governors, expressing their wish in writing to the Secretary of the Institution, and Medical Council; who shall call the same by notice in the Lewes paper, at least one week before such meeting be appointed to be held.

VIII. Parish Officers shall be requested and enjoined to have the paupers of their respective parishes immediately inoculated with Cow-pock, and the medical Gentlemen employed, are requested to keep a register of such patients as they may inoculate.

IX. A Medical Council shall be appointed, to consist of a President, Vice President and 36 Members, one-third of whom to go out

out annually in rotation, and the first 12 by ballot. No President or Vice President shall be chosen two succeeding years. This Council shall name 24 Medical Gentlemen, 12 of whom shall be chosen by ballot, to succeed to the vacancies, and from the new Council the President and Vice President shall be also appointed by majority of votes; and in case of an equal number of votes, the President of the last year shall decide; and this election is to take place at Brighton, the 17th of May in each year, being the birth-day of Dr. Jenner.

X. The business of the Medical Council shall be to superintend the Medical concerns of the Society; to appoint stations in the County for gratuitous Inoculation of the Cow-pock, and at which supplies of Cow-pock matter may be constantly kept; to give instruction for Inoculation, and to make a report of the progress of the same to the Board of Directors.

XI. The Medical Council shall meet the first Thursday of every month, or oftener if deemed necessary, five to be a quorum; and these meetings shall be alternately at Brighton and Lewes.

XII. The stations for gratuitous Inoculation shall be the following:—Chichester, Arundel, Midhurst, Petworth, Worthing, Steyning, Horsham, Brighton, Lewes, East Grinstead, Seaford, East Bourne, Battle, Tunbridge Wells, Hastings, and Rye.

XIII. At each station, a Surgeon shall attend two days in every week, viz. on the market day, and the fourth day after, between the hours of nine and ten o'clock, to inoculate gratis such persons as apply, and appear to be proper objects; no person to be inoculated who does not promise to attend on the days he is desired.

XIV. The Surgeons in each station, shall, in rotation, continue to perform this duty for three months, and it shall be conducted at the house of the acting Surgeon, who shall keep a register, and whose business shall also be to preserve virus according to the directions of the Medical Council; and to distribute it to such Surgeons in the County as may apply for the same; a list of whose names shall be preserved.

XV. The Physicians in each station, by rotation, are to attend gratis at such appointed days for the purpose of consultation on any doubtful cases that may arise; or on any other circumstance relating to this subject, that may require their attention; and they are to keep notes of remarkable occurrences.

XVI. The Secretary's duty shall be to attend Medical and General Meetings; he shall keep Minutes of their proceedings, and prepare them to be laid before the General Meeting. All letters relative to the concerns of the Society, (except for vaccine virus), shall be addressed to him, who shall lay them before the Medical Council. Registers kept, as before directed, shall be transmitted to the Secretary, at least one fortnight before the General Meeting, and he shall arrange and prepare such to be laid before the Medical Council, one week before the General Meeting.

XVII. The Medical Council is empowered to appoint any other stations for Inoculation they may think necessary, and to form any other

other regulations that may appear to them to forward the views of the Institution.

XVIII. The Medical Council shall occasionally communicate with, and at least once in each year transmit to the Secretary of the ROYAL JENNERIAN INSTITUTION in London, a general statement of the progress of this Institution; and an accurate account of the number of persons who shall be vaccinated under its direction.

Mr. EDLIN, in a letter to the Editors, dated Uxbridge, Oct. 8, 1804, says, "I should be obliged to you to have the goodness to announce in the next number of the *Medical and Physical Journal*, that I have in the press a Treatise on the Art of Bread-making; great part of it is worked off, and Mr. Hood informs me that it will be ready for publication some time in November. The intention of the work is to concentrate into one point of view every thing that is at present known respecting the manufacture of bread, in order that the knowledge of an intricate and interesting subject, which has hitherto been very imperfectly explored, might be diffused through every class of society. And to accommodate it to the inferior orders of men, it will be printed in as cheap and compact a form as the quantity of letter-press will allow."

The subjects that are proposed to be discussed are divided into the following heads:

1st. The Natural History and Cultivation of Wheat. 2d. The Mealmg Trade, including the grinding of Wheat and dressing it into Flour. 3d. The Analysis of Wheat Flour. 4th. The Analysis of Yeast. 5th. The Theory of Fermentation in Bread. 6th. The Preparation of Bread, including a compleat Account of the Baker's Mode of making Bread and Rolls. 7th. The Substitutes for Wheaten Bread. 8th. The Preparation and Preservation of Yeast. 9th. The Structure of a Bakehouse. 10th. The Assize Laws and Manner of regulating the Price of Bread.

Dr. BENDOES, in a letter to Dr. Bradley, says, that various interruptions prevented him in the first place from forwarding the concluding Observations on the Influenza; and that latterly he expected to be able to obtain from the Continent, some valuable intelligence as to its course; a part of its history so necessary towards judging of its contagious or non-contagious nature.

He adds, that immediately on the close of the present year will be put to press an ample Report of the Proceedings at the Preventive Medical Institution. This institution would enable him immediately to give full employment to an additional medical assistant, who, besides being worthy of recommendation on account of his diligence and moral qualities, should be well acquainted with the common doctrines and practices of medicine. Dr. B. conceives, that among medical students who have gone through their elementary instructions, and are not immediately disposed to settle, there must be many, to whom the situation would be highly advantageous, especially, as to ample experience it would add opportunities of human and comparative anatomy, physiological researches, &c.

A Me-

*A Meteorological Table, by Dr. HIGGINS, of Brompton.**

Days of the Month.	Thermometer.			Height of the Baro- meter. Inches.			Deg. of Evaporation by the Hygrometer.	WEATHER.
	8 o'Clock Morning.	Noon.	10 o'Clock Night.	8 o'Clock Morning.	Noon.	10 o'Clock Night.		
Sept. 20	64°	68°	65°	30.16	30.16	30.16		Fair.
21	63	67	62	.2.	.19	.21		Cloudy.
22	56	62	55	.31	29.96	29.84		Cloudy.
23	57	59	56	.66	30.13	30.19		Fair.
24	55	58	54	.24	.27	.34		Windy, with showers.
25	53	60	52	.52	.64	.71		Showery.
26	52	58	55	.86	.87	.83	52°	Cloudy.
27	60	63	58	.68	.63	.64	38	Cloudy, with rain at night.
28	59	62	57	.64	.63	.64	31	Cloudy.
29	58	60	56	.57	.47	.34	18	Cloudy, with slight rain:
30	57	59	58	.26	.18	.02	17	Showery, rain at night
Oct. 1	59	63	60	29.96	29.92	29.86	16	Cloudy, with slight rain.
2	59	64	61	30.04	30.04	30.12	18	Cloudy, rain in the night.
3	62	65	59	.09	.01	.02	38	Cloudy, with slight rain in the morning.
4	58	64	57	.07	.05	29.83	34	Fair, rain and wind at night.
5	59	63	56	29.64	29.72	30.16	40	Fair.
6	54	61	58	30.44	30.39	.37	43	Fair.
7	59	62	57	.25	.12	29.77	22	Rain, stormy at night.
8	56	59	54	29.87	29.90	.86	29	Fair.
9	52	55	45	30.06	30.18	30.36	36	Fair.
10	46	55	51	.43	.34	.05	25	Fair till noon, then continued rain.
11	59	61	42	29.61	29.51	29.46	11	Rain.
12	46	54	38	.47	.39	.40	25	Showery, with hail.
13	41	52	46	.62	.64	.58	26	Cloudy, rain at night.
14	50	58	52	.38	.38	.17	23	Cloudy, rain in the evening.
15	53	57	40	.31	.32	.56	27	Cloudy, fair in the evening.
16	45	53	40	.82	.87	30.02	33	Fair.
17	50	60	42	.93	.89	29.98	28	Showery, with a thunder storm.
18	49	58	50	30.21	30.20	30.24	22	Cloudy, with slight rain.
19	56	62	5.	.25	.20	.07	30	Cloudy.

* Agreeably to the request of the Editors, I have made the necessary observations; and find that my house is situated as nearly as possible W. by S. from St. Paul's, and that its elevation above the high water mark at Chelsea, is not more than 12 or 15 feet.

I have added an additional column to the present month's table, shewing the degrees of evaporation by an hygrometer, constructed nearly upon the principle of Mr. Leslie's; and next month, if agreeable to the Editors, I propose giving the degrees of heat by the Centigrade as well as Fahrenheit's thermometer, for the purpose of shewing the simplicity of the one, when compared with the other.

E R R A T A.

P. 305, l. 6, from the bottom, dele the words "but once."

324, l. 4, place a semicolon after "time;" and dele the pronoun "that."

THE
Medical and Physical Journal.

VOL. XII.] DECEMBER 1, 1804. [NO. LXX.]

Printed for R. PHILLIPS, by W. Thorne, Red Lion Court, Fleet Street, London.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

IT often happens that those medicines made use of in the common routine of practice, which, generally speaking, answer our purpose in the established *methodus curandi*, in certain diseases, are frequently, from unforeseen and fortuitous circumstances, rendered totally inert. Having lately experienced an instance of this kind, I am induced, with your permission, to give it that publicity which the Medical Journal will afford it, from a thorough conviction that a faithful narration of similar occurrences, will prove conducive to the good of the community, by adding to our present stock of knowledge in therapeutics, and by putting us in possession of a dernier resource, when every other method has proved abortive; for such knowledge will prove a real treasure, capable of wearing down the rough edge of disappointment, and soothing that anxiety which every professional man must feel for the welfare of his patient, as well as his own reputation; which are desiderata of no small magnitude to a man endued with *common* sensibility. Our motto ought to be, *Ne laissez rien à tenter*:

Having at present the care of the paupers of this place, I was desired the other day, to visit a young man who had been subject to a violent purging for some time previous to my attendance. I found him affected with many of the symptoms of typhus gravior; he was comatose, frequently muttered, and occasionally caught at the bed-clothes; his tongue was covered with a brown fur, his skin hot, pulse slow and feeble. The period for cleansing and preparing the *primæ viæ* for the exhibition of necessary remedies had long elapsed, and the only plan of cure which I thought could be adopted with any prospect of

(No. 70.) I i success,

success, was at once to endeavour to check the purging, and restore perspiration. To effect these purposes I administered the pulv. ipec. comp. beginning with ten grains three times a day, and increasing the dose till he took two scruples in twenty-four hours; he was put into the hot bath, and had afterwards flannel applied to his body; his food was farinaceous and gelatinous, but his stomach was so irritable, it could retain little, and that quickly passed through him; his egesta were often tinged with blood. I considered his disease to be a well marked dysentery, as it was attended with tenesmus and shooting pains in his bowels, particularly about the regio umbilici. Finding these remedies fail, I had recourse to a variety of astringents, such as catechu & cret. pp. combined with aromatics, and laudanum to the amount of gr. 100 in the course of the day and night; but these were also useless, and did not appear to alleviate a single symptom. I was hitherto completely baffled, and now determined to try the effects of solid opium; and, strange to tell, he took seven grains in twenty-four hours, without restraining the purging. Though I have been in the habit of treating dysentery in tropical climes, in the whole course of my practice I never knew opium have so little effect: it has frequently cured this complaint, I may almost say, per se; and with the assistance of a saline purgative or two, it seldom failed; but my patient in this case was so much reduced, that this practice might have been considered as an act of unpardonable temerity. Nor durst I attempt to give a combination of calomel with opium; I therefore had recourse to mercurial inunction, and with the happiest effects it crowned the earnest expectations I formed from it. About two ounces of the ungt. fort. were rubbed in, before its operation on the system became visible. As soon as his mouth was affected, his skin grew moist; and on visiting him one morning, I was astonished to find him in a perspiration so profuse, that the hair of his head resembled the grass in a summer's morning, bespangled with dew. From hence we may conclude, that the hair which people lose after fevers, is occasioned from lack of moisture.

Every untoward symptom now began to vanish; his mind, which had been so long oppressed, again exerted its rational powers; his stomach, instead of loathing food, began to relish it; his purging soon left him; in fine, the stimulating and deobstruent qualities of the mercury completely restored the healthful equilibrium, which appeared to have been destroyed from want of cuticular secretion; and

and gentle tonics, assisted by nourishing diet, soon restored him to his wonted health.

I am perfectly convinced, that a more general adoption of those methods of cure which have of late obtained in the *public service*, would prove highly beneficial to private practitioners, and the public at large; but the ever to be deprecated idea, that innovations are *always* dangerous, serves to shut the door of reason, and prevent the cheering rays of science and improvement from illuminating the benighted mind. The good effects of mercurial inunction in typhus and malignant fevers, have been displayed in numberless instances, and well merit the most serious attention of such medical gentlemen as are strangers to this mode of practice: and I should not be surprised to hear, that this treatment has been the most successful, in the cure of that terrible scourge which is at present committing such ravages at Gibraltar.

I lately, through the medium of your Journal, when treating on Sphacelus, made mention of the powerful effects of nitre, in correcting putrescency, and arresting the progress of mortification; two cases were then adduced, where its efficacy was proved in the most unequivocal manner. I have at this moment a patient under my care, who had a mortification on the external part of the forearm and hand, occupying a space of 9 inches in length. The integuments, fascia, and part of the muscles were completely destroyed, as well as the extensor digiti medii tendon; and though the mortification was so extensive, the repeated application of powdered nitre prevented the mass of humours from being corrupted by the absorption of putrid virus; it appeared very evident at every dressing, that the nitre had perfect command over this dreadful disease, by entirely subduing that cadaverous fœtor which always exhales from mortified parts. When I found the smell no longer offensive, I applied a cataplasm of roasted onions to the part, by way of removing the slough, and assisted its operation by means of fomentations; composed of bitter and antiseptic herbs, such as wormwood, &c. The line of separation soon appeared, and the sphacelated parts were easily removed, (the tendon excepted, which was a considerable time in sloughing away) when the onions were discontinued, and boiled carrots were applied; the wound soon began to assume a favourable aspect, being filled up with healthy florid granulations, and is now nearly cicatrized.

It is worthy of remark, that the patient's stomach was very little affected; he was enabled to take in a sufficient quantity of nutriment, which, in all probability, would not have been the case, if absorption had taken place, or his stomach had been loaded with *huge doses of bark*; he took the decoct. cinchonæ, and was allowed strong beef soup, with a liberal quantity of port wine and mild ale. Dr. Willich, in his Treatise on Diet and Regimen, has remarked, that pork predisposes to mortification; and I believe there is much truth in the observation. My patient had subsisted chiefly on pig-meat; and it appears from the history of his case, that his misfortune arose, in the first instance, from a small pimple on his hand, which became so troublesome, that he was induced to apply to a celebrated empiric, whose skill was so perfectly baffled in this case, that he was constrained to acknowledge, from the black, blistered, swelled, and frightful appearance which the patient's hand and arm exhibited, that the case required more of the acumen chirurgicum, than he could boast of, and recommended his poor suffering and deluded patient to apply for further advice, as mortification had already taken place. Nor was it surprising, considering the treatment which had been adopted; white lily root and a variety of acrid substances were applied to assuage a most active inflammation! As I have so frequently experienced the good effects of the remedy which I so strenuously recommend, I request as a *particular favor*, that some of my medical brethren will, when opportunity offers, publish the result of cases which may occur in their practice, should they be disposed to place that confidence in it which its efficacy so justly entitles it to. In a crowded hospital, after a great naval action, I have known some of the stumps become sphacelous; but these unhappy men soon fell victims to death: I have since often regretted, that the virtues of this invaluable medicine were then unknown to me.

It has lately been ascertained, that the nitrous acid gas possesses the power of destroying contagion, on which account Government supplies the Navy with the materials and utensils necessary for the purpose of fumigation. It has often been proved, that malignant ulcers, exposed to the action of the fumes, have been converted into a mild state, and easily cured: yet, having a knowledge of these circumstances, I must confess that I was not induced to use this remedy from any analogical inference striking my mind, but from the simple idea, after a fruitless struggle

gle to subdue the factor issuing from a sphacelous foot, that as nitre was found to preserve animal substances from putrefaction, it might also arrest its progress when commenced; and such has been invariably the result in the cases which have come under my care.

It may not be amiss to inquire into the *modus operandi* of this medicine, which I shall only attempt in a cursory manner, and leave the rest to those who are more fond of speculative and chemical inquiries than I am.

Modern chemists have discovered, that nitre is a composition of oxygen and azote; and whatever may be the component parts of animal substances in a state of putrescency, it is certain they contain some part very greedy of oxygen, which is readily imparted by the penetrative and soluble nature of this salt, that seems to neutralize and render the offensive mass perfectly innocuous. Charcoal, which is said to contain a quantity of oxygen, has frequently been applied to mortified parts; but it is probable that it cannot give it out with the same facility as nitre does; on which account it is less efficacious. Though this line of the poet be not applicable, "*Omne tulit punctum, qui miscuit utile dulci*," I hope the request I have made may be attended to, and that the time I have employed on this paper will not be considered as mispent.

I am, &c.

Romsey, Nov. 13, 1804.

RALPH CUMING

SOME REMARKS ON THE PRESERVATION AND MANAGEMENT OF LEECHES; by G. WILKINSON, *Member of the Medical Society of London, of the Royal College of Surgeons of Edinburgh, and Honorary Member of the Medical Society of Aberdeen, Literary and Philosophical Society of Newcastle upon Tyne, and Chirurgo-Physical Society of Edinburgh.*

GREATLY as the Art of Medicine has of late years been improved by the industry and diligence of its professors; yet so much remains to be done, that we can scarcely flatter ourselves (as human beings) that it will ever attain its *ne plus ultra*, or state of perfection. Hence it follows, that whatever tends to its advancement in the smallest degree, however frivolous it may appear to the indolent,

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careless,

careless, and unreflecting part of mankind, will nevertheless be regarded as important by the wise and prudent.

I have been led to these reflections from the inquiries of your Correspondent, S. M.* relative to the mortality and preservation of leeches; a subject of many other apparently trifling appendages to Medical Science, that not only appears to be little understood, but very much neglected. Very many animals, and indeed almost every living creature, has become more or less the object of the inquiry of ingenious Naturalists; but that which relates to this useful and (I may justly say) valuable reptile, the leech, appears, so far as I am acquainted, to be very much neglected.

To trace its first introduction into medical practice from the earliest period of time, with its natural history, preservation, and management, and to compare its effects with those of venæsection, cupping, blistering; scarification, caustication, cauterization, and various other external means, used for the cure and alleviation of different complaints and diseases; together with what relates to their action and effects produced on the animal system, locally or generally, would, undoubtedly, be of no small acquisition and importance to Medicine. That such an inquiry is not unworthy the attention of some of your learned and ingenious Correspondents, whose leisure, ability, and inclination might induce them to prosecute so useful and necessary a subject, there can be but little doubt.

Your Correspondent, S. M. speaks of the great mortality that happened among his, and other gentlemen's leeches, nearly at one and the same time; and as his paper is dated in the month of August, and these deaths seemed to occur in the preceding months, it is by no means improbable, that such an accident may have proceeded from the heat of the sun, or degree of temperature in which they had been kept. That it has frequently been the case with leeches kept in such situations in summer, I have often known to occur, and sometimes, though not frequently, in very severe winters. Whatever difference there may be in the nature and properties of the water in which they are to be kept, seems to be a matter of dispute; Mr. Whitlam† prefers river to spring water, and your Correspondent S. M. and
he

* Medical and Physical Journal, No. 67, Vol. xii. p. 220.

† Ibid. No. 68, Vol. xii.

he are of opinion it should be renewed daily. The former gentleman also recommends that this water, (but for what reasons he has not assigned) previous to its use, should be kept in a cistern two or three days; and in cold weather, that it should be in a tepid state. Mr. Ring says,* "that the wholesale dealers in leeches keep them in spring water during the severity of winter, because it is then warmer than river water; possibly, it may be better than river-water during the summer, because it is then colder, and particularly if the putrefaction in river-water have any share in producing the mortality in question." He also says, "It is obvious that a cool situation should be preferred in summer, and a warm one in winter." These remarks of Mr. Ring, are perfectly consonant to my experience, not only with respect to the spring in preference to that of river water, but also that of the temperature of heat necessary to keep them, which in summer I have deemed not higher than 60°; and in winter not lower than 50° of Fahrenheit's thermometer.

The diurnal change of the water, for which your Correspondent and Mr. Whitlam contend as necessary, though not noticed by Mr. Ring, seems, so far as my observations extend, to be of no essential service. Water, when pure and fresh from a spring or river, is in the Scripture phrase termed *living*; but when deprived of its vitality by putrefaction, or rarefied by heat, becomes dead. This process however, which takes place much sooner in water alone than that in which leeches are kept, even in the same degree of temperature, is a fact that cannot have escaped the notice of those persons, who for any length of time have been in the habit of observing, how much longer water retains its sweetness in which these animals are kept, and also small fish in glass globes.

Perhaps the vital principle of the animal, resident in its natural element, may contribute in no small degree to uphold, or support, for a longer space of time (than it otherwise would do) the vitality of the water; and, *vice versa*, the vitality of the water, when in a due state of temperature, may be said to support the animal.

These old fashioned remarks, which I have hazarded on account of their being easier understood by general readers, (than those of modern chemical phraseology) may perhaps serve to explain the reasons why leeches are

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* Medical and Physical Journal, No. 63, Vol. xii.

more subject to die in vessels containing a great number and in which there may not be a sufficient proportion of water to each, than of a small number which are kept in a large quantity of water; and also serve to develope, in some measure, the late mortality complained of by your Correspondent S. M. as well as other considerable losses that may have happened to others in similar situations.

Leeches which I have kept, although not more than six or eight together, were usually put in an eight-ounce vial, and have sometimes, even in summer, not had their water changed for some weeks; and in winter I have kept a similar number even to two months or more, yet I have always found the water free from fætor, although I then changed it; but even this was often done by way of preventing what might not have happened, than perhaps any injury that would have taken place after twice or thrice this space of time had elapsed; for I have known not a few instances in which from one to two or three leeches, kept in a like situation, have remained alive for nine months, or above a year, without a change of water; and this last was not found putrid.

It has not unfrequently happened, that when one, or perhaps two leeches died, that these were such as had a little before been applied; and not being sufficiently disgorged, were then put in a phial with others that had not recently bitten; the blood remaining in them from their bite, being afterwards evacuated in the water, it, in the space of six or seven days, became putrid, but was instantly changed, to prevent the destruction of those remaining. The putrescency of the water in this instance, perhaps, was as much occasioned by the blood as the death of the leeches, which proceeded from their improper treatment, they having been applied by an unskilful person.

Of late, it has been customary for me to keep leeches, immediately after they have bitten, in a separate vial, and to examine them daily, being of opinion that such are more liable to die than those that are fresh, or have bitten some time prior, and are recovered.

No single leech, nor any number that have recently bitten, should be put into a fresh stock, or among such as are in health, after having performed their office; this appears to be more requisite, as, should any of the number die, it will be difficult to determine to what set they appertain, or to what cause their death is to be imputed.

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In one instance, where a single leech had been kept in water unchanged for more than six months, and in another, where two were in a similar situation, the water of both was not foetid, but somewhat muddy; this being thrown away, and fresh added, they, in the space of four or five days, were found dead.

From these considerations I have been induced, on changing the water in which leeches are kept, whether for a long or short space of time, except it be once every two or three days that I have occasion to use them (and then I omit this process) to mix one-third, or half as much fresh to the old water; a precaution which, however frivolous it may appear, seems not unnecessary, as the variation or difference between these waters (but on what account I do not pretend to say) most likely occasioned the death of those already noticed.

These occurrences, which seem merely the result more of accidental observation than any designed experiment for the real ascertainment of the facts I have advanced, tend to prove, that the frequent change of water is by no means so absolutely necessary as is supposed; for the proofs already stated appear more, I think, to discourage its frequent use than what has been advanced in its favour. S. M. says, that his, and friend's leeches died, notwithstanding this precaution; and in most instances this has been found to be the case generally, more especially as has been already noticed, where there has been a considerable number crowded together in perhaps too small a portion of water, added most probably to that of a heat of too great a temperature.

The subject next for our consideration is, that of their application, management, and the treatment posterior to the performance of their office. These being of more real importance than superficial, self-sufficient, or inattentive observers may deem necessary, will, I am persuaded, be considered in a very different light by those who have experienced the difficulties, accidents, and disappointments, with which it is not unfrequently attended.

A wine glass, of a larger or smaller circumference, and proportionate to the surface, or part, to which one or more of these animals are to be applied, seems much more convenient than the fingers; and that not only with a view of observing their motions, circumscribing their limits, retaining them in their proper place assigned for their bite, but it also tends to support them when filling, and thereby prevents

prevents their separating from the parts sooner than they otherwise would do.

To confine them on the temples, pubes, groin, scrotum, knee, or elbow joints, eye-lids when tumefied from blows producing extravasation, face, neck, and certain tumours of a circumscribed magnitude, as well as the limbs of children, &c. a smaller glass will not only be necessary, but the degree of pressure should be such as to prevent their escape, and so managed as not to give pain.

Prior to their being put on, the parts should be cleaned from such applications as have been previously used, with a sponge dipped in soap-lather, and wiped dry. This precaution, though sometimes neglected, seems absolutely necessary, as the effects of some remedies* not only prevent their biting, but to my certain knowledge have almost instantly destroyed them.

On being applied, they sometimes lie long in a torpid state; and at others, they recede, will not bite, or even touch the part, but tenaciously adhere to the top of the glass; on removing them, and applying others, *they* have immediately fixed, and on their falling off after being glutted, those which before refused have afterwards bitten, no doubt from the effects produced on them by the blood, with which they are in contact. To ascertain this fact, I have at times punctured my hand on its upper surface with a lancet, and on rubbing the parts with this blood, frequently succeeded, when for a long time they refused biting, after a small portion of sugar and water, and even milk alone, or mixed with the same, had failed. In short, so much patience, as well as dexterity, is requisite in the management of these capricious, or rather irritable animals, that it may, notwithstanding the apparent simplicity of such an operation, be considered as an art.

Some instances have occurred where they had bitten and remained on the part but for a short space of time, so as to have got but little blood; by dint of patiently retaining them on the part, I have found that they fell to it again, and performed well.

In cases where the use of leeches is urgent, it seems expedient (if they can be procured) to have them not only large ones, but where a number are required to be applied, to be prepared with ten or a dozen; by these means, we have

* Such as volatile liniment, camphorated spirits, ol. terebinth, solutio sal. ammon. &c. &c.

have not only a choice, as some will, and others will not bite, but a greater certainty of effecting our purpose more completely.

It has nevertheless happened not a few times, when I have had occasion to use them in the evening after sunset, that is, where I used candle-light, although I have sometimes tried half a dozen separately, or two at one time, that they would not bite; moreover, I have also remarked, that in cloudy, or rainy weather, particularly when the barometer was low, they were equally averse.*

These animals, as I have sometimes experienced, do not, and indeed will not, bite on places covered with hair, more particularly on the scalp, where it is strong, and thick set; for admitting this part to be close shaved, I have found the sharp points of the incised hairs so greatly to annoy them, as to prevent their fixing; but on the temples, the hair being of a thinner texture, or less thick, by close shaving, not only a larger space has been procured for their range, but they have more readily bitten. In like manner, if the hair is close shaved from the pubes, groin, scrotum, arm-pits, &c. for reasons already named, they will more readily bite than they otherwise could have done.

Exclusive of what has already been said, there still remains some other remarks necessary to be noticed, which is the situation of the patient's body previous to, or at the time of their application; this should be in a horizontal posture, when applied to the belly, sides, breast, or breasts, (these last, in women, may be elevated, and also the scrotum or testes). But when applied to parts appertaining to the head, as the temples, face or neck, a sitting posture will answer the purpose by reclining it in whatever posture it may be suitable. The upper and lower extremities, with the posterior parts of the body, to which last they are but seldom applied, require no particular directions, but may be managed according to circumstances; those regarding the mouth, such as the gums, lips, or inside of the cheeks, may be left to the prudence and discretion of the operator, or operators. In these last complaints, it however
appears

* That leeches are influenced by the state of the weather, there can be no doubt; and on this account many persons have considered them as tolerably accurate barometers; be this as it may, my experience has not yet furnished me with a sufficient number of observations to ascertain this fact with strict accuracy.

appears to me, that their use should be laid aside; for whatever advantage may be expected to be derived from their application in such cases, they certainly are not worthy the attention of the medical adviser, operator, or that of the perplexity, uneasiness, and risque incurred by the patient; and this more especially as it is safer to use the lancet where gum-boils or abscesses are to be opened; or if this is not necessary, scarifications or incisions.

I should have noticed, that when the leeches are firmly fixed on the part or parts, and in the act of *suction*; they ought by no means (which not unfrequently happens from the awkwardness of the patient, or person holding the glass) to be disturbed; this ought to be so managed as to support them when fixed, till they are glutted; the glass being reclined so as to admit air; and the operator, while in the act of performing his office, should, to prevent his arm being wearied, rest it on something solid.

Supposing however it should happen, which it would not, if the operator was not a mere bungler, he having the leeches in the glass to see what is going on; I say, were they to bite, or fix on improper places, or what is full as bad, on his fingers, or hand, common salt being always ready, (he should be careful not to pull at the animal lest he destroy it, and perhaps ineffectually put the patient or himself to unnecessary pain) a little should be put on its mouth, which will instantly cause it to fall off safely.

Our next inquiry relates to their treatment after having bitten, the nice management of which, is of the utmost importance for their future preservation; and this is the more to be regarded when we reflect, that after having done their office, they are by many considered of no further use.

By some, their death has been ascribed to what they term, the poisonous effects of the blood, or other fluids imbibed; and this opinion has become stronger in proportion to the greater or less distance of the time of their dying when separated from the parts bitten. If, e. g. as is usually the case, they are thrown on a large quantity of salt provided for their purgation, their immediate death, which is the necessary consequence, is ascribed to the cause above mentioned, and is also considered in the same light, should they die in a longer or shorter time after being put into water; but if they fortunately escape death, from the more skillful management by the salt not coming in contact with other parts of their body, excepting their
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mouths, the marvellous opinion of the poison received vanishes.

Whatever may be the notion of the poisonous effects of blood sucked by leeches, so as to occasion their death, is to me a mere *chimera*; I do not think they can be injured by it, provided they are properly managed after performing their office, and this not only from reasoning, but my extensive experience convinces me of its fallacy.

Neither do I believe that a leech or leeches, which may have been previously applied to patients in the small-pox, measles, scarlet fever, venereal buboes, or other affections of this sort, or to cancerous, venereal, or phagadenic ulcers, bite of a mad dog, or any other specific disease whatever, will or can communicate a similar affection; and this no more than I ever believed that the matter taken for inoculation from the small-pox of a child, labouring at the time under scrophula or lues, could communicate those diseases. As for any other mode of treating them than that with common salt, I profess myself totally unacquainted; but as this has answered completely to my satisfaction, and needs only to be used with caution, I shall proceed to relate in what manner it is to be used. Having prepared a large shallow clean plate, and some salt by itself, together with a bason half full of fresh water, I put the leech or leeches thereon, after they have bitten. I then take a small portion of salt, equal to a moderate pinch of snuff, compressed between my thumb and fore finger, to make it fine, and place it in contact with the mouth of the animal. I carefully avoid at the same time, touching with it any other parts of its body, which, should this happen, may be easily pushed gently off with the fingers. This causes it to contract itself, should it not immediately disgorge, into a thick short round form, while at the same time it projects, and turns up its mouth into a small, tapering appearance, resembling a proboscis, and in this state will often remain for some seconds, in a sort of torpor, till at length it recovers by disgorging a small quantity, and at other times does not. The salt, which I afterward increase a little in quantity, is then so put on the plate, that the animal in its progressive motion may come as nearly as possible in contact with it, by its mouth, no other parts being allowed to touch the salt, to prevent the injury resulting from its application, which, should this happen, will more or less damage it, by corrugating, or blistering its body. This mode of procedure, though slow, is not altogether unamusing, and it is curious to perceive how it avoids

avoids the salt on slightly touching it with its mouth, when if it should come in contact beneath this part, it does not appear to be disturbed; but should it firmly fix its mouth on the salt, which is often the case, it is sure to vomit most plentifully, sometimes in a small thready stream, and at others in small gulps; the blood, as may be naturally expected, is at first of a moderate red colour, but on mixing with the salt, a beautiful scarlet hue diffuses itself, as it were, *quaquaversum*, from the centre to the circumference. In this manner, it is necessary to proceed by alternately placing the salt to its mouth, till by reiterated disorgements the animal has emptied itself, which may be known from its being reduced to the size it appeared prior to its application, and from its ceasing to vomit on coming again in contact with the salt; but as the dose of the salt may be carried to too great an excess by its frequent repetitions, and has happened to be the death of two of my vermicular patients, a third, after remaining a long time in a state of torpor, recovered, it behoves us to act with no small caution; and as a proof of having carried this evacuating plan too far, the leech, when sufficiently purified from its blood, not only appears to be reduced to its natural size, but is apt from being before this, brisk and lively, to become, when plied with too much salt, inactive, and turns on its back. It is then high time to throw it into the bason of fresh water, and if it is free from injury, it will immediately frisk and play about, although I have known them, after remaining for some time in a state of torpor, ultimately recover. Such of these leeches as have gone through the processess we have described, and appear to be perfectly recovered, should be kept separate from those that are sickly, or in a state of vital suspension; this is the more necessary, as in case of death, they will be apt (as has already been hinted) to prove destructive to those which are in health.

I ought to have stated, that where much blood was evacuated on the plate, from one or two leeches falling off together or separately, it should be afterwards cleaned with a wet sponge, in order to admit others, as well as to avoid the confusion and embarrassment by its quantity and disagreeable tenacity, enveloping and adhering to the leeches, as well as with a design to observe their motions, when under the evacuating plan; and I must also remark, that placing a little salt occasionally at the verge, or extreme circular boundary of the diffused blood, in which they are surrounded, this salt being diluted, has the advantage

vantage of operating less forcibly on every part with which it comes in contact, and is the less liable to do them any material injury. Separate plates, or rather cleaning one plate, after each leech has been purified, seems necessary from what has been said.

Leeches, managed in the cautious manner we have observed, most assuredly will survive after their operation, be they ever so frequently applied; and it is remarkable, that such as are in the habit of biting, are preferable to those that are fresh or untried, as they more greedily fasten themselves on the parts to which they are applied. The larger they are the better; the middle size require more in number to equal the effects of but a few of the former, while the small ones, even in diseases of children, appear to be but of very little use, excepting in some cases of extravasation of blood not deeply seated; and these last, even from the gentle treatment recommended after biting, are much less liable to survive.

From what has been said, it evidently appears, that the consumption or rather destruction of leeches, proceeds perhaps as much from the barbarous murders injudiciously committed on them after having performed their office, as that of keeping or preserving them for mere sale for the consumers. And it may be taken for granted, that these last persons, from the sordid avarice of the retail dealers, who have lately experienced the sweets of their enormous profits,* will hereafter, by their keeping up an artificial scarcity, still continue (if not checked) their impositions.

It cannot therefore be doubted, that should these animals be carefully preserved, which by skilful management after their operation (from the rules prescribed) they are most likely to be, their scarcity and enormous price will not only be lessened, but their use more generally extended, and that among the inferior class of people, which at their present exorbitant price, seems almost impossible.

As a positive and convincing proof of what I have just now advanced, exclusive of what I have experienced generally, I must beg leave to remark, that being under the necessity myself, of using leeches in a complaint requiring their reiterated application for more than seven months, and

* Your Correspondent, S. M. says, that in February and March, this present year, they could not be purchased in Covent-Garden Market for less than 3s. 6d. each. At present, August 6, they fetch 8 or 9s. per dozen; less than twelve years ago, he bought them for 2s. 6d. or 3s. per hundred. *MED. and PHYS. JOURNAL*, No. 67, Vol. xii.

and not being able to procure more than ten of a tolerably large size, I applied five, alternately, for at least fifty times, in the space above mentioned; of these, two were lost, a third was given to a patient, which was killed by mal-treatment, a fourth died, and the rest remain in perfect health.

To point out more clearly the important advantages resulting from such laudable industry in the preservation of these useful animals, I have made the following estimate: And though, according to the careless treatment generally used, one leech seldom bites more than once; yet, to give a fair and reasonable statement, I have allowed such to bite twice.

Number of leeches used	—	—	—	—	10
Applied alternately, five each time, to the number of					50
Number of bites for the whole, amount to				—	250
Number of bites for each, considering their alternate application	—	—	—	—	25
Number required according to the general treatment to perform the same number of bites, allowing each to bite twice	—	—	—	—	125

This number, at 3s. 6d. each, as lately sold at Covent-Garden Market, amounts to the sum of	21	17	6
Ten, at the same price, will amount to	—	1	15 0

Money saved, £. 20 2 6

In this part of the world, they are sold at a more reduced price, about 9s. per dozen; this, however variable, produces no alteration in the comparative difference, but leaves the money saved proportionably the same.

If, in the instance we have related, this æconomical practice appears so highly beneficial, its general adoption cannot but be productive of immense advantages, as the great benefit derivable from the *æconomy of life* in these hitherto neglected animals, will become a principal means of preventing their future scarcity, which, in not a few instances, where their use is absolutely necessary, cannot easily be replaced by any other means capable of producing similar effects.

Sunderland, Nov. 5, 1804.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

THE disease of hepatitis suppurans terminating favourably, being a rare occurrence, but very few instances of which, if any, are upon record, I have transmitted to you the following case, and request you will give it a place in the Medical Journal.

W. B. aged twenty-three years, a private in the Loyal Birmingham Volunteers, when marching in a very hot day in June last, with the battalion, from Litchfield to Birmingham, was suddenly taken ill on the road, but continued his march. I saw him two days after his arrival here, when he complained of a pain in his right hypochondrium, extending to the scapula on the same side, with cough, and inability to lie on the left side, and every other symptom of acute hepatitis; his pulse was quick and full. I ordered him to be bled to ℥xvj . immediately, a large blister to be applied to the right hypochondrium, and a laxative medicine with calomel to be taken. The blood exhibited much of the inflammatory or buffy coat, but the symptoms were not much alleviated, and venesection was ordered to be repeated to the same quantity as before, and small doses of tartarized antimony to be taken frequently. The discharge from the blistered part was kept up by the application of the unguentum cantharidis.; subacid fruits, and low diet were enjoined. The day following, he found himself better, but not free from pain; the blood had the same appearance as before, and his pulse being still full and strong, he was again bled, after the interval of one day, to ℥xij . The blood still showed a slight inflammatory coat, and he found himself much relieved, the pain having left his shoulder, and being able to lie on his left side, but he still felt some uneasiness about the region of the liver; his appetite was bad, and his ancles became œdematous. He was now ordered to take small doses of calomel, morning and evening, and (the part where the blister was applied being healed) a drachm of the unguentum hydragryi was directed to be rubbed into the side twice a day, and he took a mixture with about five drops of laudanum, three times a day. This was continued for a few days, when Dr. Carmichael attended the patient with me; his

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cough became more troublesome, and was followed by a purulent expectoration. On examining the affected side, a small tumour was observed with slight fluctuation, and the patient began to complain of cold shiverings, and soon afterwards became hectic. We had now no doubt but that suppuration of the liver was taking place, and a seton being passed through the tumour, more than a quart of very fetid matter immediately issued from it, and the expectoration of pus ceased: a mixture containing the nitric acid and camphorated tincture of opium was prescribed. The discharge from the seton continued the whole day. On the morning following, when we saw our patient, he was in a most deplorable situation; the thread of the seton not having been properly tied, had come out in the night, and the discharge from the side had stopped, but large quantities of fetid pus, of a coffee colour, mixed with blood, were emitted from the mouth; the cough was most urgent, the pulse weak and rapid; cold drops of sweat were distilled from every part of his body, and his cheeks were alternately overspread with a deadly paleness, or flushed with hectic fever, and a speedy dissolution was to be expected. Nearly two large chamber-pots full of pus were thus discharged from his mouth in about twelve hours. The thread was immediately replaced through the tumour, and poultices applied to the side, and small doses of opiates, with mucilages, &c. prescribed. In a few hours the discharge by the mouth ceased, and never returned; that from the side appeared again, and in considerable quantity. The day following the patient, though extremely weak, felt himself much easier, and the violence of the cough (though it troubled him for some time afterwards) was considerably abated. He continued the use of the above medicines with trifling alterations, for some time, which were afterwards changed for the decoction of bark with a few drops of laudanum. The hectic fever gradually left him, and the cough and pulmonary affection (produced by the discharge of the matter through the diaphragm and lungs to the mouth,) have now entirely disappeared; and after the space of three months, the whole of which time pus continued to issue from the affected part, he perfectly recovered his health, and is now as well as at any period of his life, excepting that his side is not yet quite healed.

On being present some time ago at the dissection of the body of a person who died of enteritis, evident marks of a former

former suppuration of the stomach, (from which the patient had recovered,) were found. I may, perhaps, trouble you with the case at some future time. I am, &c.

Birmingham, Sept. 8, 1804.

GEO. EDW. MALE, M. D.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

I Have read with much pleasure, in your highly useful Journal of the last month, an ingenious and liberal communication on the cure of agues, by your correspondent Mr. Snow. I cannot but think it reflects the highest credit on him and all others, who come forward with so much professional candour to state facts, unbiassed by prejudice or false hypothetical reasoning and theory, or making real truth and actual benefit, as many do, their last consideration. I am most decidedly an advocate for the use of emetics in the cure of agues, in the form of nauseating doses, as has been recommended. You certainly act by them on the skin in a way that cannot be done by any other means, stimulating the excretory surface, relaxing its spasm, cutting short the rigour, altering its form, and ultimately curing this kind of fever; for although I do not consider spasm as the cause of intermittent fever, but as one of the train of symptoms, yet no doubt its removal by this stimulus on the sentient extremities of the nerves, is always importantly necessary to the cure. My object, then, in this, is to suggest an improvement in the emetica had recourse to in the cases mentioned by Mr. Snow; it is what I, in several cases of late, have uniformly used, and in most instances with the happiest effect. I unite with the tart. antim. an equal part of the cuprum vitriol. and two parts of the pulv. ipecac.; this I give in small and repeated doses, so as to produce nausea or slight vomiting at the commencement of each paroxysm. The advantage I think of this medicine over that of the tart. antim. alone is, that with its emetic property is combined a tonic one. The repeated use of it does not interfere with or lessen the tone of the stomach; the strength of the system is kept up and increased, Nature is enabled to exert herself, and, with this assistance of art, to throw off the morbid impression made upon her by the poison of fever. I am, &c.

Framlingham, Suffolk, Oct. 14, 1804.

L. DAVIE.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

THE observations which have occurred to me on perusing Dr. Kinglake's Dissertation on Gout, are by no means inimical to the mode of cure there recommended; for, I think, that with a due degree of caution, it is the true remedy indicated by the nature of the disease; and which will finally prevail over the prejudices that have in all ages obstructed the free use of it; though it seems that in a few instances, which ought to have weight from the celebrity of their names in medical science, (I allude principally to the examples of Dr. Harvey and Dr. Gregory) it has been adopted without fear, and been attended with no bad effects, that could in fair reason be attributed to it; yet they have not been sufficient to open the eyes of the generality of medical professors, or to induce an imitation of the practice. Dr. K. is, I think, much to be commended for having introduced it to the notice and consideration of the medical world; and I hope his theory of the disease, as well as the mode of cure he recommends, will undergo a thorough investigation. I have no wish to raise frivolous objections either to one or the other; but with respect to his theory, it seems to me a mere gratuitous assumption, that gout is a disease of the ligaments and tendons only, as no proof is offered to establish so necessary a position; necessary, I mean, to his theory; because on the truth of this fact the impossibility of constitutional or visceral gout is made to depend. I might, I think, as plausibly maintain, on the other side of the question, that gout cannot be a disease of the ligaments and tendons, because there is no connection or association between the ligamentous and tendinous structure, and that of the visceral organs, its primary seat. But I apprehend such a mode of arguing will have little weight with Dr. Kinglake, or any philosophic mind, towards establishing what, nevertheless, I believe to be true, namely, that gout is not a disease of the ligaments and tendons.

I rather agree with those physicians, who consider it as a disease of the membranes that cover the joints, which from their situation, their perpetual extension and contraction on the frequent motion of the joints, are liable to greater mobility, and consequently more susceptible of
inflamm-

inflammation than the membranes in their vicinity; and from the similarity of their structure with the membranous parts of the stomach and liver, may have their action associated with those important vital organs. Perhaps Dr. Kinglake would find it difficult to assign a reason, why, when gouty inflammation attacks the tendons and ligaments of the great toe, and of the ankle and knees in succession, or at the same time, the intermediate parts of that structure should escape without injury. But there seems no room for such an objection on the view of the disease which I have presented. Now supposing, (and I am inclined to think, that gout is produced on the extremities in this manner, though I am ready to own that the subject is very obscure, and perhaps will never be explained) supposing, I say, that some important viscus, or some membranous parts of it, become affected with a degree of torpor in consequence of cold, owing perhaps to a deficient secretion, caused by a want of due stimulation. the usual stimuli having lost a part of their effect, or the affected viscus a part of its irritability, what is the consequence to be expected? By a law of the animal economy, as it is well explained in *Zoonomia*, (a work which I may observe, by the way, has not yet received due attention, nor its author his due honours,) the torpor, after a certain time, should be followed by inflammation, where the vital powers are sufficient for that purpose; and by another law of the system, that inflammation does not take place on the part affected with the torpor, but is immediately transferred to a less important part, that is, to the extremities, as far as the sympathetic action can be carried, and as far as possible from the seat of vital motion, which is always the last to suffer, and does not in this disorder materially suffer, so long as it retains the power of making that salutary effort, and of relieving the more important viscera, by a metastasis of the inflammation. When gout attacks the stomach, I believe it is always the torpor which the vital powers are insufficient to remove; and which sometimes, by association or sympathy of contiguity, extends to the heart, and puts a sudden period to life. In this stage of the disorder, opium and the hot spices, by enlivening and giving a temporary force to the oppressed vital powers, produce not only a cessation of the torpor, but an increased activity, in proportion to the previous degree of it; which the vires medicatrices naturæ, exerting themselves, remove to the extremities; and it there constitutes a

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salutary disease for the moment, or one of very little consequence, compared with that which it succeeded.

With respect to the *practice* of Dr. Kinglake, my only difference with him is, that I think some caution is necessary in the application of his remedy.

When the inflammation is completely formed on the extremities, (not at the first feeling a painful stiffness of the affected joint) and when the visceral uneasiness, arising from their torpor, which I believe always precedes the inflammation of the extremities, has entirely subsided, I see no reason why the remedy recommended by Dr. Kinglake should not be immediately had recourse to, and, as I am convinced, without any danger of repulsion, because then the sympathy, I apprehend, ceases, and the associated action between the affected viscera and the extremities is as much dissevered, as if no such sympathy had ever existed; the viscera having recovered their healthy state, (*generally*, I believe always, except where the constitution is broken down by the violence and duration of former attacks,) as soon as the inflammation is fixed on the extremities. Therefore we may surely proceed immediately to the cure of it; and that we may do so without danger to life, is abundantly evinced by that cloud of witnesses, brought forward at the end of the volume; for which we are indebted to the science of Dr. Kinglake, and the successful boldness of his numerous correspondents. From whose testimony it appears, that in all the variety of ages and constitutions, and in habits which had experienced the tyranny of this disorder without controul for a great number of years, the relief obtained by the simple application of a cold fluid, was immediate, safe, durable, and perfect. Dr. Kinglake (by the bye I think, rashly) has challenged the whole world to produce an instance of failure, or of a calamitous issue; and not one has been produced, or produced only to be refuted.

The case of Mr. Baker, of Uxbridge,* ought by all means to be laid before the public. It would be the greatest sacrifice to false delicacy, not to say great inhumanity, to refuse a compliance with the request which has been made for that purpose, when so much instruction is probably to be obtained from it, if it be related without prejudice, and with a strict attention to the minutest particulars. I believe

* We perfectly agree with Mr. M. and believe the public will not be disappointed. *Ed.*

believe it will be found to confirm the necessity of the caution, which I have insisted on, that the remedy should not be applied till the inflammation is completely formed on the joints, when the sympathy or associated action is supposed no longer to exist. If ice water be applied before that period, the torpor from so great a degree of cold would not only instantly put a stop to what may be called the salutary inflammation of the extremities, which is just beginning to form, but would perhaps be immediately communicated to the viscus, the original seat of the disorder, the associated action between them not being entirely dissevered.*

I have heard of a case somewhat similar; the particulars of which might, perhaps, yet be redeemed from oblivion. It is that of the Rev. Mr. Smith, who was Rector of Grinstead, in Colchester, nearly twenty years ago, who, I believe, sprained his ankle, and treated it as a sprain with cold applications. But it was supposed to have brought on sympathetic gout in the stomach, and was certainly attended with fatal consequences. If inflammation was the consequence of the sprain, and, in spite of that, the gouty torpor seized the vital parts, it might receive some explanation from that law of animated Nature, called *reverse sympathy*, which more frequently occurs in weak than in robust constitutions, as well explained and illustrated in various parts of *Zoonomia*. If Mr. Newell, who, I believe, did at that period (as he has done ever since) administer the comforts of health, under Divine Providence, to the inhabitants of Colchester and its vicinity, should deem it a case of any importance towards throwing light on an interesting and momentous question, which must be considered at present as undecided, and will have the goodness to collect and communicate the particulars of it to the public, I will venture to affirm, that your numerous readers will be no less gratified with an impartial and minute statement of an interesting case, than instructed by the justness and philosophical correctness of his remarks, if he should think proper to add a *y* to the statement.

I am, &c,

Bromley High Elms, Oct. 15, 1804.

JAMES MANTAL.

* A Case has been sent to us where these cautions were not attended to, and the termination was fatal. As our Correspondent requests Dr. Kinglake's opinion on his manner of treating his patient, we shall send Dr. K. a copy of the Case, and expect his answer. Ed.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

AS the following case appears to be strongly illustrative of the observations lately published by Mr. Abernethy, on diseases resembling syphilis, the importance of which must be obvious to every one; I have thought it worthy of publication. If you are of the same opinion, you will, by inserting it in your valuable Miscellany, oblige,

A CONSTANT READER.

J. H. a young man of a sanguineous temperament, and apparently of a scrophulous habit, applied to me the latter end of February last, for the cure of a venereal sore throat. On enquiring into his case, he assured me that he had had no primary symptoms whatever. He informed me, however, that, about ten months previous to this attack, he had undergone a mercurial course for the cure of a suppurating buboe and sore throat, which had been preceded by chancres. At the time the mercury was left off, the buboe had not healed, having degenerated into a fistulous sore, which, however, had quickly healed on being laid open, and from that time he had remained perfectly free from every symptom of syphilis till he had occasion to apply to me. On a stricter enquiry as to the symptoms preceding the affection of his throat, of which he now complained, I found that he had felt a slight degree of irritation about the glans penis a few days after coition, attended with a very slight discharge from the orifice of the urethra, which ceased almost immediately on washing the parts with cold water. This was succeeded by some degree of stiffness and uneasiness in the groin, which had been before affected, and in which a little fulness and hardness had been perceptible ever since the healing of the sinus. This affection of the groin, however, was so slight, as not to give him any alarm; and there being not the slightest appearance of chancre, he did not apply to me till his throat became sore; on looking into which, I discovered an ulcer on the right tonsil, which had all the characteristics of a venereal sore, viz. a circumscribed hollow sore, the bottom covered with a white slough, and the surrounding edges much inflamed. The situation of my patient,

patient being such, that he could not, without the greatest inconvenience, rub in mercury, I began by giving him hydr. muriat. gr. $\frac{1}{2}$ ter quotidie. Under this treatment the ulcer in a few days ceased to spread, and in little more than a fortnight was completely healed. But being unwilling to trust to this remedy alone, and also conceiving that, since he had no primary symptom, this affection of his throat might have been owing to some syphilitic virus, which had long lain dormant in the system, till called into action by the irritation of the glands abovementioned, I strongly recommended to my patient a further continuance of the use of mercury, to which, having suffered but slightly from it, he readily consented. I therefore gave him the pil. hydrarg. in such doses as to keep the gums slightly affected for five weeks longer. Having now undergone a two months course of mercury, I thought he might safely leave it off, and advised him accordingly. But within forty-eight hours after this, he began to complain of his throat again, which appeared considerably inflamed. Attributing this to an improper exposure to cold, while still under the influence of mercury, I contented myself with giving him a gargle, and desiring him to keep his throat warm. In a few days he again applied to me, and told me he thought there was an ulcer in his throat; and, on examination, I discovered one on the left tonsil, less circumscribed, and more superficial, than the one which had appeared on the right tonsil, but still having the white slough at bottom, and the inflamed edges characteristic of a venereal sore. I had again recourse to the hydrarg. muriat. which not appearing to produce any effect upon the sore, I gave the pil. hydrarg. so as to affect the mouth considerably. Still, however, the ulcer shewed no symptoms of amendment, nor did it spread; but above it two other ulcers broke out, about the size of a small pea each, but without the venereal character. I now began to have some doubts as to the nature of this affection, and had almost resolved to leave off the mercury, and put the patient upon a course of sarsaparilla, &c. when, as the mouth became more affected, the smaller ulcers healed. The original one, however, continued nearly in statu quo; and, at the same time, a great deal of scurf began to collect about the roots of the hair. I therefore continued the mercury some days longer, when I happened to meet with Mr. Abernethy's valuable work. The perusal of this, determined me to leave off the use of mercury immediately, and trust to nature for the removal of these

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apparently

apparently syphilitic symptoms. For near a month the ulcer in the throat underwent no alteration; and, during this time, two small ulcers, similar to the ones above described, broke out, and healed again in a few days. It is now upwards of two months since the mercury was left off, his throat is quite well, the roots of his hair entirely free from scurf, and he has shewn no other symptom whatever of any syphilitic taint remaining in the habit.

The above case suggests some very curious enquiries. Was the ulcer, which first appeared in the throat, venereal or not? If it was, how did it arise? Is it possible for the venereal poison to be absorbed into the system so as to produce secondary disease, without having first excited local disease, as chancre or bubo? Or, might the ulcer have arisen from virus, which had lain dormant in the hardened glands since the healing of the sinus in the groin, which the stimulus produced upon the glans penis by coition, and communicated to the absorbents of the groin, had excited them to take up into the system? Or, did all these symptoms arise from acrimonious matter, not venereal, as supposed by Mr. Abernethy, communicated during coition? There is every reason to conclude, although the short space of time elapsed since the mercury was left off will not allow complete certainty upon this head, that the ulcers which appeared in the second instance were not venereal; and hence we may be led to doubt, whether the first affection of the throat was so, although it so readily disappeared under the use of mercury. These are enquiries of great importance, and deserve the attentive consideration of those who are more equal to the task, than the author of these observations.

Sept. 6, 1804.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

AS any thing which relates to the improvement of medical science is readily admitted into your publication, possibly you will insert this from a constant Reader of your communicative and useful works.

Being one of the medical profession, and constantly anxious to cultivate that science in the most proper manner,

ner, much of my time has been occupied in ascertaining this point.

I am at present a young man, lately settled in practice, after having studied with the greatest assiduity Physic, Surgery, and their necessary branches, in London and at other places, for a considerable number of years, and have now in particular a great propensity to *read* every publication relating to my profession, from which intelligence may be gained. I am convinced of the truth of the old observation, "*Est modus in rebus,*" and wish to act as influenced by it. I have frequently endeavoured to prove the propriety of reading medical works, in conversation with different men of my profession, and as frequently almost found them ready to oppose me; suffer me, therefore to make a few observations relative to *reading in particular*, as one mode of instruction.

The general objection started against reading, is, that it is likely to make a man an unsteady practitioner or a theorist. This savors too much of the natural disposition of the English, who had rather follow the tracks of their ancestors, than endeavour, by theory and experiment, to improve a science which, from a due observation of facts, might daily be brought nearer to perfection; as a wise author justly observes,—"*Prejudice often prevents men from seeing the truth, though it stands before them.*"

Reading without theorizing, I consider as but of little use; and I am sometimes inclined to think, that those who declaim against it, are too idle to think or to arrange important matter which might be acquired from reading, so as to retain it, and apply it when necessary; thereby verifying the old proverb, "*Quod volumus facile credimus.*"

An elderly man perhaps will say, When I was young, I read much, paid great attention to what I read, and if I met with any new medicine, or any new mode of treating a disease, recommended, I gave it a trial; but finding them in time give place to other new doctrines, I went back to my old plan, and so have proceeded for years. This was language really made use of to me by a respectable practitioner, considered eminent by the people among whom he resided. I am vexed to meet with old professors conversing in this way to students, because I am convinced it will lead many young minds astray, if too much impressed with the opinion of men who have become idle with old age.

Mr. John Hunter is generally brought forward by some, as an instance of an eminent man who read but little;
but

but it should be at the same time remembered, that he was a man of strong natural abilities, such as few possess, and of intense thought.

I would only ask, how it is possible the practice of a medical man should keep pace with the improvements of his profession, where he resided in the country, without reading? One of the most useful kinds of reading, I consider that of reading periodical publications like the *Medical and Physical Journal*, for the papers in this work, be they ever so disinteresting, are not of sufficient length to occupy much of the reader's time; and, in general, are so well selected as to convey much intelligence, and to lead the reader into a train of ideas upon a variety of subjects, from which great benefit might arise, and which otherwise would have been neglected. I am convinced much more might be said in favour of *reading*; but I do not wish to occupy much of your paper, trusting that some one of your Correspondents, more competent than myself, will favour the public with some further remarks on this subject, or point out his objections to these of

September 6, 1804.

JUVENIS.

TO DR. BATTY.

SIR,

IN your Tenth Volume, p. 410, is inserted the Case of Miss V. The following is the result of that extraordinary case, which will probably prove acceptable to the Readers of the Medical Journal.

I am, &c.

W. M. THACKERAY.

Chester, October 18, 1804.

On December 20, 1803, Miss M. V. felt a trifling oppression at her chest, accompanied with flatulency and pain.

On the 23d, She took her powder (pulv. gratiolæ ʒß, pulv. zing. gr. v. 2dis horis per tres dies) which though operating violently, so far from relieving the oppression, seemed rather to increase it, and her rest at night was disturbed by a gnawing pain in her limbs, differing materially from the spasms, but which generally precedes them,

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On the 25th, In addition to these symptoms, her hand was closed with the cramp, which was relieved by immersion in cold water.

On the 26th, She took a dose of calomel; every day the sensation of weight became more oppressive.

On the 28th, Her mouth, throat, and tongue were attacked by a severe spasm; instant relief however was obtained from the cold water.

On January 6, The flatulency and pain continuing, she tried once more the gratiola powder; it failed of affording its wonted relief. The oppression now became almost insupportable, and a sensation of violent pricking attended it, which was momentarily mitigated by either brandy or wine.

On the 8th, (as had been the case for many preceding evenings) About ten o'clock, violent pain and flatulency came on, when brandy and ætherial drops were ineffectually administered. About two in the morning she was apparently easy and composed for sleep, when suddenly she complained of an inability to move the right arm; this want of sensation immediately extended itself to that whole side, and ere she could close her description of this partial suspension of feeling, the half articulated sound died on her lips, and every effort was made (ineffectually) to restore animation. The whole frame assumed and retained, whatever form or posture it was placed in; even those attitudes that, in health, are thought most painful long to continue in; her breathing was free, and her pulse regular, though low, till a few minutes preceding her recovery, when it fluttered violently. A transient shivering now agitated her whole frame, and with a sudden and convulsive sigh she opened her eyes, as if awaking from a deep sleep, and complained of extreme weariness and languor. During the night she several times relapsed into this state of insensibility.

On the 9th, Though low and nervous, she sat at dinner with the family, from which she was called before the cloth was removed, to Mr. Cartwright. She complained to him of the oppression, &c. and declared her firm conviction that she was going to have a serious attack. While conversing with him, apparently free from pain, she suddenly ceased to speak, her unclosed eyes became fixed, and her person, retaining its erect position in the chair, seemed transformed into a statue, only that her pulse beat regularly, and her skin was of a comfortable warmth. Mr. C. ordered her in this state to be put under the shower-bath, which instantly

instantly restored animation, but excruciating agony succeeded in her head, stomach, bowels, and limbs; occasional delirium, violent shivering, and during the paroxysm (which lasted nearly sixteen hours) relapsing several times into insensibility. She took eighty drops of tinct. op. and a musk draught, as well as a large quantity of brandy, but without any sensible benefit. The anguish in her stomach continuing, Mr. C. directed tobacco steeped in brandy to be applied as a poultice to her stomach. It seemed to afford a trifling alleviation of the spasm, but its subsequent effect was truly alarming; a death-like sickness supervened, accompanied by violent straining to vomit; she had cold and clammy perspiration, and her countenance was pale, livid, and distorted. She repeated, while delirious, long pieces of poetry with emphatic propriety, marking the passages that were peculiarly striking with an increased energy of enunciation, and occasionally observing on them with discriminating judgement.

The next day she appeared extremely debilitated, and at the usual hour at night, similar sufferings commenced, attended with a dejection of spirits, as unusual as distressing. The shower bath was had recourse to four times, and it never failed of affording relief, though sometimes the benefit was more apparent, sometimes more permanent, at other times merely transitory, the spasms returning a few minutes after emersion.

Wednesday night was ushered in by sufferings still more acute: for nearly three hours she was deprived of her speech; her head, stomach, and limbs were violently convulsed; then animation seemed wholly suspended, and her tortured frame, unequal to the struggle, bore every appearance of immediate dissolution. I now ordered her beverage to be iced, and large lumps of ice to be brought for trial; her teeth for some time had been fast closed, and by holding the ice a few seconds on her lips the muscles gradually relaxed. As if guided by instinct, she seized the ice, and rubbed her face, neck, and arms with it, signifying by gesture the ease it afforded. We then laid a piece on her stomach; the effect was as salutary as instantaneous, though, on its removal, the bowels again immediately contracted. We persevered in putting pieces of ice into her mouth, as the former ones dissolved, and finally had the satisfaction to find this experiment crowned with success; as it restored her speech, the deprivation of which had so greatly alarmed us.

The next night the paroxysm commenced about ten o'clock;

o'clock, we then put her under the bath, and afterwards gave her 100 drops of tinct. op.; dreadful spasms succeeded in every part of the body, more especially the stomach and bowels, alienation of mind, suspended animation, in short, every symptom of this strange disorder. In the space of one hour we gave her 300 drops of tinct. op. with manifest advantage. The anguish seemed mitigated, and notwithstanding the delirium continued, it was unaccompanied with horror or distress. She held an imaginary conversation with a female friend, rallied her foibles with wit and spirit, exemplified her arguments with anecdotes, directing her voice, look, and action to vacuity. During four hours she took nearly 500 drops of tinct. opii, and was four times under the shower-bath.

On Friday evening her complaint returned at the usual hour, though the spasms were much less acute. Her stomach was greatly relieved by a strong assafoetida draught. She had long intervals of apparent cessation from pain, during which she not only repeated from various authors, as was her wonted practice, but attended to, and answered questions and observations that we put to her, with so much judgement, discrimination, and rationality, that, but for the peculiar turn of her countenance, unusual energy of her manner, and the total absorption of her mind in the subject that occupied it, (for though she would reply to any observation on that, with perfect precision, it was wholly impossible to turn the current of her ideas into another channel) we should scarcely have suspected in her any alienation of mind. Suddenly she ceased to speak, an universal rigidity pervaded her whole frame, and in about a quarter of an hour she uttered several sentences in an under tone of voice, like one who talks in his sleep, though articulately; she then began to be violently convulsed, and during the space of half an hour she seemed to suffer the extreme of torture. In this state we had her carried under the bath, which instantly restored her to ease and recollection. This night she took 400 drops of tinct. opii.

To the present period, Feb. 13, she has had no return of spasm, and is now able to walk two or three miles without the least fatigue. The shower-bath is continued every morning, and occasionally repeated in the evening.

P. S. I was in Shropshire last month, and saw my patient perfectly well. The young lady intends to persevere in the use of the shower-bath the whole of the approaching winter.

CASE OF POISON FROM A VEGETABLE FUNGUS; together
with Remarks on Professor Rossi's two Cases of SUP-
POSED Rabies Canina; by SAMUEL ARGENT BARDSLEY;
M.D. Physician to the Manchester Infirmary.

(Continued from our last, pp. 385—391.)

TWO or three days after the accident,* I requested Dr. Hull, (whose botanical knowledge is well known, and justly appreciated) to accompany me with my patient, and his companion, to the spot, where they had gathered and eaten the fungus. We found, in different states of growth, a species of agaric, which the children immediately pointed out as the one they had partaken of. This species is certainly different from any of those enumerated as poisonous by Plenck and Balliard.

The *agaricus bulbosus*, of Sowerby, (plate 130) approaches the nearest to it of any which Dr. Hull has ever seen. The sensible qualities were not such as would lead one to suspect its poisonous nature. Its juice was neither milky nor acid. In smell and taste it was not very unlike the common mushroom, or the kernel of an unripe hazel nut.

The following description of this agaric will perhaps enable some botanical reader to decide, whether the fungus be an undescribed species, and may tend to prevent the bad consequences arising from eating it in future.

Description of the Agaric.

STALK central, solid, bulbous at the base, gradually attenuated upwards, curved, ascending; brownish buff; length from three to four inches; diameter at the base from half to three-quarters of an inch; ring cobweb-like, or wanting; no wrapper.

PILEUS brown buff, darker in the centre; somewhat convex, slightly bossed, margin turned in; diameter from one inch and a half to four inches.

GILLS buff, somewhat decurrent, giving a scored appearance to the stalk, as low as the ring, or remains of the curtain; very numerous, four in each series, two of the

* These additional Observations of Dr. Bardsley were intended by him to have been given in his Paper which appeared in the last month's Journal; but from accident, they were not received until his first Communication had been sent to press. **EDIT.**

the loose gills very small, the middle one extending more than half way to the stalk.

THE second case of *supposed* canine madness, recorded by Prof. Rossi, is scarcely deserving any comment. No one symptom characteristic of the disease is stated to have made its appearance. The patient had been bitten by a dog, said to be rabid; and the uneasiness and dread of danger arising from this accident, naturally deprived him of sleep. Opium, instead of alleviating, seemed rather to increase his restlessness. We are indeed told, in vague terms, "that the patient even began to feel an obstruction in his throat;" and that immediately upon this symptom appearing, Prof. Rossi commenced his Galvanic operations, and in fifteen days the patient recovered. Of what did he recover? Surely no one will reply, "of *rabid hydrophobia*." The idea is too absurd to be entertained for a single moment. I mean not by these remarks to deny that Galvanism may possess a salutary influence, in subduing many obstinate diseases. Its merits as a remedy cannot, at present, be duly appreciated. It would appear from Prof. Rossi's representation, that it acts powerfully on the nervous system, and seems likely to prove an useful auxillary in the cure of several diseases, arising from inordinate spasmodic action. But that it is capable of subduing *genuine hydrophobia*,* remains yet (unfortunately for mankind!) to be verified by experiments, conducted with impartiality, ability, and accuracy.

Manchester, October 11, 1804.

TO DR. GILLESPIE.

SIR,

I Take the liberty of sending you three cases, which I request you will have the goodness to put into a proper form, and if advisable, to publish them through the medium of your learned and respectable friend, Dr. S. Should

* I intend soon to publish the History of a fatal Case of Hydrophobia, with the appearances upon dissection, (the case I have already alluded to) in which it will appear, that *Galvanic shocks* were tried *in vain*; together with the exhibition of large doses of the volatile caustic alkali, and cantharides, in substance.

they be deemed of any importance, it will encourage me to send you occasionally upwards of one hundred and sixty other cases, many of them extraordinary ones. *It has generally been a received opinion that the Indies are unfavourable to surgical operations*, but I can with great truth contradict it, having performed most of the operations we are acquainted with, to the number of one hundred and sixty-five in this Island, and being fortunate enough to lose only six of that number. I have never met a case of tetanus in my practice, but one, which yielded to the cold bath, bark and wine, with opiates occasionally. The *Lobelia* is a new medicine here, and I became possessed of it very accidentally at St. Croix, about eighteen months ago. My friend, Dr. Stevens, formerly a physician of great eminence, (*see Cullen on Digestion.*) had some plants of it sent from South America in a box; I prevailed upon the person who had charge of it, to spare me one small sprig, which, with much care and attention, I have propagated to a considerable extent.

I am, &c.

P. W. BRODY.

CASES IN SURGERY. *By Mr. Brody, of Tortola.*

- On the 30th of March, a little boy, about eight years of age, belonging to the Honourable Richard Augustus Teahie, had the metatarsal bones of his right foot shattered, and three splinters of wood wedged between them; in this situation a medical gentleman, who in my absence attended for me, wrapped the foot up, after applying lint and spirit to the laceration. On the following day I had the boy brought to my Hospital; and upon opening the wound and introducing my finger, found splinters, which with some difficulty I extracted, as well as several pieces of bone. The boy had passed a restless night, though an opiate had been given; he had a smart fever and slight delirium. I ordered an aperient mixture, which produced two good evacuations. At noon, the fever still continued, and the parts looked very livid; I took off his leg at the usual place, and upon unscrewing the tourniquet, to my great surprise, not a drop of blood issued from the arteries. I gave him bumpers of Madiera wine, and waited in vain for half an hour in expectation of seeing the arteries, in order to secure them, but could not. He continued feverish for two days after the operation, during which time he took the saline mixture; his body was kept soluble

soluble by injections, castor oil, and a decoction of manna and senna; he had large anodynes at night, but rested indifferently. He could retain no nourishment until the 3d of April. When the dressings were removed, they came away with great ease, and the stump looked healthy and in every respect as well as most I have seen; his fever now left him, his appetite returned, and he continued taking bark and nourishment freely until the 10th of May, when he was discharged cured.

What could prevent the effusion of blood? He lost very little at the time of the accident. He was under no apprehension at the time of the operation; indeed, he was in a state of delirium.

I have since had an operation where the patient died on the 3d day after it. He was an athletic man, about twenty-five years of age, and was wounded on board a privateer belonging to Mr. J. Dougan, the Navy Agent here; from the time he received the wound, which was in his wrist, he became delirious, without fever, and continued so until his death. I had his head shaved and minutely examined, but could trace no sign of injury.

I have sent you a drawing of an extraordinary exfoliation. (*See plate.*) The subject was a Dutchman, aged twenty-five, and sent to me in November last from H. M. ship, Chichester, Capt. Spears, who received him from Barbadoes Hospital, where he had been invalided. I understood from himself he had been sent to the hospital for typhus, and that his head had been blistered, and the integuments sloughed off from all the fore-part. When brought here he was a most dismal object, his sore resembling a cancerous one; wherever any of the corrosive discharge touched, it excoriated and induced a sordid ulcer. I gave him bark, wine, anodynes, &c. I washed the ulcer with a decoction of cicuta, and administered the extract internally to no purpose for two months; the good nourishment and healthy situation proved in some degree serviceable, as his appetite became better and strength amended. About this period I understood he had been afflicted with syphilis about eighteen months ago, which induced me to put him upon a slight mercurial course, the ungt. hydrarg. fort. was used ʒij. every night for three weeks, without producing any effect upon his mouth; the sore still looking very ill with glossy surface full of small holes, from which issued a most fœtid and caustic discharge; at this time the black part of the drawing was quite bare. Being still of opinion that syphilitic virus

was the principal impediment to the cure, I had recourse to a strong decoction of the lobelia (which I have propagated largely in my garden); he took about a quart of it daily. In ten days the wound looked better, the bone became loose, except at the angles, where I was obliged to use the knife to disengage it. About the size of a half crown piece of the dura mater was bare, which I covered with soft lint every morning and evening for about a fortnight, when granulations were formed and the part filled up apace; from that time his health returned, and he was perfectly cured and sent home in the *Ulysses*.

REMARK.—The lobelia may be found to prove a medicine of efficacy in various other complaints, as well as in syphilis; the good effects therefore of this simple, in the present case, is far from establishing the identity of syphilitic disease in this instance.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

ENCLOSED I beg leave to send you a drawing of a Steam Apparatus, which I suggested might be of material service in the cure of malignant ulcer, in the inflammatory stage; and from the evident success which attended it here during a tedious continuance of the disease of twelve months and upwards, I would strongly recommend the trial of it to all my brother officers in the Navy, who may have such an obstinate complaint to contend with. It can always be used at sea; the only necessary article to be procured on shore is, a leaden tube about six feet long, with a cock in it, as described in the *plate*, by which and the valve on the top of the box, the degree of heat required can be most correctly regulated with the assistance of a small hand thermometer. I found its good effects on many occasions when inflammation was seated on any of the extremities, in removing irritation, abating pain, and relaxing the surrounding integuments. The time necessary to keep the diseased part in the box, I found, was about one hour morning and evening, and the degree of heat about 100; if continued longer, it was liable to produce languor and syncope. Immediately on being removed from the steam, warm emollient poultices were applied

M. Brodie's

Steam Apparatus. — p. 316. N^o 70

. Common Ship-Stove.

. Copper Kettle.

. Leaden Tube 6 feet long.

. A Cock in it.

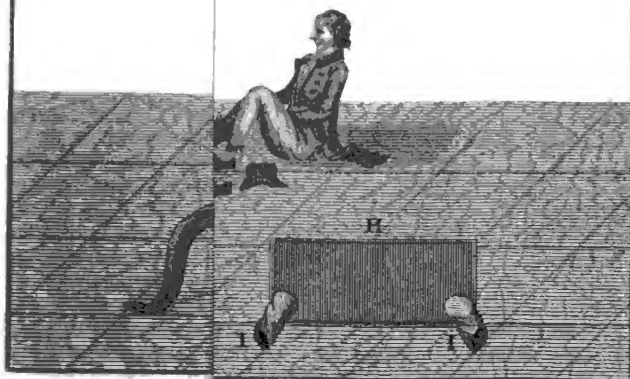
. A Wooden Box $2\frac{1}{4}$ long, 1 foot deep, 1 $\frac{1}{2}$ broad.

. A Valve to allow the steam to evaporate.

. A Thermometer to regulate the degree of heat.

. A Front view of the Box.

*. Two Apertures lined with Baize to admit the
diseased limb.*



S. Lister sc.

applied with a view to assist in promoting suppuration, and which I found, from repeated proofs, to answer fully my expectations, by causing the sloughs to separate much quicker than could be expected, and by that means preventing many denudations and tedious exfoliations of the tibia.

I am, &c.

R. WILLIAMS, Surgeon.

H. M. S. Northumberland, off Ferrol, October 30, 1804.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

THE Cow-pock having given rise to two parties, one of its prophylacticity, the other of its indifference, (which latter party, for the sake of humanity, it is hoped is fast sinking into greater indifference) three partisans also of a classical term for the disorder having arisen, be pleased once more to allow me to intervene between Dr. Walker and Mr. Ring; or, as the former might not disapprove of my expressing myself, to step into the ring, in behalf of VACCÆVARA.

Vara is *not* "a more precise term than the diminutive variola for" the small-pox, (see Dr. W. Medical and Physical Journal, No. 69, p. 440) but it is a more precise term for the cow-pock, because the word *variola* respects the number of small pustules by which the skin is varied in the former, whilst *VARA*, not a diminutive, may better express the single and large eruption that appears in the latter. *Vara* has taken place in medical language, if the handwriting of a medical man upon a paper of vaccævarous matter, *Vara vaccina*, which I have seen, is any authority. *Vara* is also as old as Pliny; but *varicla* is still newer than *variola*.

Vaccævâra may by use become as euphonous as *venæsectio*, to which, as a compound, it is analogous. *Asscævération*, pronounced by quantity, would be nearly as cacophonous as *vaccævaration*; but, would any one therefore say, *assiolation*, and because of the similitude of this new coin to an established one? Thus *acceleration* too might be *acciolation*.

Classical minds will respect Dr. W. as a man of abilities; but, classical ears will not be *heifer'd*, if they can help it, with *vacciola*; any more than classical tastes will admit *vaccina* to express a disorder, and thereby to create a disgust against milk, butter, and cheese, those agreeables, of which alone, from the term, they had been accustomed to conceive ideas. But, *vaccina*, even for the disorder, is much better than *vacciola*, the former being an established word, while the latter never can be any thing better than

(*verbo venia*) a more barbarism. I do not, however, despair of seeing *vaccīōla* the *mumpsimus*, that will expel the *sumpsimus vaccīna*; so strenuously is the former protected and promoted.

Dr. W. does me the honor of wishing me to be a compound maker; what thinks he then of *Boūñōšūs* (a dactyle and perfectly euphonous) for cow-pock; *bounosize*, to (suppose) *vacciolate* or inoculate; *bounosism*, vaccinoculation; and *bounāsērous*, for *vaccarārous*, matter? I abide by the decision of the College of Physicians; but, *manum de tabula*; for Dr. W. may be assured, that I am no maker of medical compounds. *Quod medicorum est promittunt medici*; — not, Your's, &c.

Nov. 3, 1804.

PHILOLOGUS.

ON AN ATROPHY OF THE TESTICLES *observed in Egypt; by*
MR. LARREY, *Chief Surgeon of the Army.*

SEVERAL soldiers of the Army of Egypt having complained of the total abolition of the testicles, without any previous venereal disease; Mr. Larrey, surprized at this phenomenon, endeavoured to discover the cause, and to observe the progress of this singular malady; the results of which are as follow.

Generally one of the testicles gradually lost its sensibility, became soft, diminished in size, and seemed to be exsiccated. The patient perceives nothing of this destruction, which proceeds insensibly, till the testicle being reduced to a very small size, is found near the annulus abdominalis, in form and size of a white bean; then it becomes indolent, and grows hard, and the spermatic chord decreases likewise, and participates of this disease.

When both testicles are affected, the patient is deprived of his generative faculty, which he observes by the total absence of carnal desires and amorous sensations, and by the laxity of the genitals; and this, the author has found to be the case with all that experienced this malady, and which influences likewise the whole system, as it grows also weak; the lower extremities emaciate, and the pace becomes waddling; the countenance is changed, the beard grows thin, the stomach becomes weak, the digestion is impaired, and the mental faculties deranged. Several soldiers became invalids in consequence of this disease.

Mr. Larrey ascribes this malady, chiefly to the intense heat of the Egyptian climate, which by relaxing the texture

ture of the testicle, disposes it to that sort of dissolution; the most fluid parts of this organ go off by transpiration, and another portion is absorbed by the lymphatic system, and brought within the course of circulation. The parenchyma of the vessels, which resist these effects, shrinks, the tubes contract and dry up, the whole mass of the testicle loses more or less in its compass, and becomes emaciated. To this, as a principal cause, may be added, the fatigues of war, and the frequent wants which the troops experienced; but more particularly the use of the spirit from dates, which the inhabitants, in order to make it stronger and more palatable, draw off with the fruits of several solanaceous plants, as the *pseudocapsicum*, and the common *capsicum*, both which serve as spices: and, perhaps, says Mr. Larrey, they know it by experience or tradition, that these substances diminish the nervous sensibility, which much easier developes itself in hot climates, and becomes more susceptible of too great a mobility. The author takes an opportunity to remark, that he has likewise observed the paralytic effects of the *bella-donna* on the organ of sight; and he cautions particularly against employing solanaceous remedies in hot climates. When the atrophy of the testicles is perfect or complete, the art offers no remedy; but when it is only commencing, the disagreeable consequences may be prevented by cold baths, by dry frictions of the body, by urtication applied to the breech, by stomachic remedies, and a full diet.

In order to be secured from this accident, it is advisable to avoid the use of spirituous liquors, and particularly of the spirit drawn from dates by the Egyptians; further, to wear a straight suspensorium, to wash the body frequently with fresh water and vinegar, and to abstain from the sexual intercourse.

OBSERVATIONS ON THE INOCULATION OF *BLENNORRHEA*,
(OR *GONORRHEA*) in Cases where this Running is suddenly suppressed, and the Suppression attended with dangerous Symptoms; by Mr. LARREY.

THE author of this memoir relates several interesting cases, in which he effected a cure of serious maladies by the inoculation of the virus gonorrhœicum, or a weak solution of ammonia in water.

Obs. I.* Many of the soldiers, while in Egypt, were affected with very obstinate ophthalmies, attended with ulcerations of the eye-lids, which had a cancerous appearance. A fetid purulent humour run down, which excoriated that part of the cheek on which it rested, although but for a short time. The cornea was either perforated, or a staphylome appeared, and sometimes the membranes of the eyes received a carcinomatous character. These accidents never manifested themselves but in individuals who had been previously affected with gonorrhœas. Mr. Larrey employed some general remedies, but chiefly the artificial or natural inoculation of gonorrhœa; the first of which was effected by injecting into the urethra a sufficiently strong alkaline solution, in order to produce a slight inflammation; in consequence of which, a new running ensued, and these gonorrhœas have constantly removed ophthalmies of that nature.

Obs. II. In other cases, the suppression of these venereal runnings was followed by a copious secretion of the nasal mucus, which, from being in its natural state, without smell, whitish, and slightly saline, became greenish, liquid, and the smell of a gonorrhœic running. The membrana pituitaria excoriated; and when the disease was neglected, the ulceration became chancreous, the membrane was corroded, and the bones were affected. The remedies employed in these affections were nearly the same as those directed for gonorrhœas; but experience seems to prove, that the patient must be also treated with the internal use of mercurial preparations.

Obs. III. Some soldiers were affected with almost complete deafness, attended with vertigo, and very troublesome tinklings of the ear, in consequence of the suppression of gonorrhœa. Injections of different liquors into the meatus auditorius had been tried, and blisters applied in the vicinity, without any effect; on the contrary, the deafness seemed to increase. Mr. Larrey ordered injections of ammonia to be made into the urethra, which produced an irritation sufficient to re-establish the running; and from the first day of this running, the tinkling of the ear disappeared, the patients could hear much better, and distinguish different sounds. The cure was finished by the use of mercurial frictions, and some grains of muriat of mercury united with opium, and taken internally in a proper mixture. Another soldier was inoculated with the
virus

* What we term *cases* the French surgeons call *observations*, &c.

virus of a natural and fresh gonorrhœa, and when the running took place, the tinkling of the ear ceased; a few days after the patient could hear with the left ear, and by degrees was perfectly cured.

Obs. IV. A young lady had all the symptoms of a pulmonary consumption in the third stage; the expectoration was purulent, fetid, and greenish; the difficulty of breath and oppression very considerable. The odour and particular nature of the discharge brought up by coughing, caused the author to suspect the suppression of a leucorrhœic running. Upon inquiry, he found, that at the period when the disease had commenced, this lady had had a running of the vagina, which had been cured by injections of acetated lead and the use of some liquors; and that during the last four years, the breast had never ceased to be affected. Mr. Larrey no longer doubting the cause of this disease, injected a weak solution of volatile alkali at the entrance of the vagina, which immediately produced a considerable phlogosis, attended with a purulent running, which became, in the course of a few days, very copious. After this had continued twenty-four hours, the patient fell into a quiet sleep, without being troubled with cough and expectoration. The pains of the breast gradually abated, and a few days after she had scarcely any fever in the evening. While the running increased, the affection of the breast disappeared, and after a proper treatment, the appetite, force, and vigour of body returned.

Obs. V. A soldier was attacked with a purulent dysenteric flux, which he had suffered several years, and for which a great number of remedies had been unsuccessfully employed. The alvine excretions were frequent, often attended with tenesmus and violent colics, particularly during the night time. The patient was in a state of marasmus, when Mr. Larrey examined him; and learnt, that at the period when the dysenteric flux had commenced the patient had been affected with a gonorrhœa, which he had removed by astringent injections. The antisyphilitic treatment was then employed, and a few days were sufficient to produce a favourable alteration in the state of the disease; mercurial frictions on the belly seemed to be particularly serviceable, and he took internally corrosive sublimate. The vigour of his body began to return, and two months after the consultation, the patient attended to his usual business.

Obs. VI. Another soldier, aged 26, of a feeble constitution, was received into the hospital on account of a violent gonorrhœa. By the use of sopient antispasmodic remedies

medies, and the application of leeches, the most pressing symptoms were removed, and repose procured to the patient. The running increased, but it was fetid and greenish. Baths were continued, and also the use of a sopient emulsion; and he was directed to take an antisyphilitic potion in the morning. The running, however, remained copious, and continued so a month after his first entrance into the hospital. But about this period the patient imprudently used the cold bath; in consequence of which the running was suppressed, he became feverish, complained of pains in the sides, was obstinately constipated, had a burning sensation in the belly, ardor urinæ, and a great dryness of the skin. The following morning the whole surface of the body was affected with an erysipelatous inflammation, which, running through its stages, terminated on the 9th day in suppuration. This first began on the skin of the hands and feet; the epidermis was detached, and the suppuration so copious, that it required to be dressed four times a day with lint and cerate. The feverish symptoms disappeared, and this disease became rather idiopathic. The matter of the suppuration proved somewhat analogous to that of virulent gonorrhœas; it was thick, viscous, of a greenish colour, and emitted a fetid odour. It issued not only from all points of the skin, but also from the nostrils and cavity of the mouth. This state of general ulceration occasioned the greatest pains to the unfortunate patient, and he could not repose himself in any kind of posture. For more than a month after using the cold bath, ulceration had been as copious as general; during which period, exsiccatives had been applied, but the crust thus formed contained under it a greenish matter; the hair fell off, the nails were disorganised, they became thick, scaly, rough, and dark yellow. Mr. Larrey determined to put an end to this miserable state, by making injections into the urethra with the pus taken from the hands and feet; and the gonorrhœa soon appearing, the general suppuration diminished. The dressings with ceratum Saturni, and wine mixed with honey, were continued, and the patient took internally a sudorific rob with a little muriat of mercury, of ammonia, opium, and ether. The suppuration continued longer on the hands and feet than on the rest of the body, but at length the whole skin healed; and when no ulcerations were any longer perceived, Mr. Larrey ordered mercurial frictions to be applied every three or four days, and the use of baths. Towards the end of the treatment a bubo appeared, which opened of itself; the nails were reproduced; and the

the patient left the hospital perfectly cured, five months after he had entered it.

Obs. VII. A soldier was sent to the hospital on account of a virulent gonorrhœa, which he had had a few days. The matter that issued was greenish and fetid; he had violent pains the whole length of the urinary canal; the urine passed with difficulty, and with an insupportable burning sensation: the erections were frequent, and he was feverish and restless. By the use of sopient mucilaginous potions, baths, and very small dose of corrosive sublimate taken with milk, the symptoms greatly diminished, and the patient, complaining of nothing but the running, desired to be discharged from the hospital.—Some time after, this soldier, desirous of freeing himself from the running, took the advice of a quack, used the cold bath, and introduced into the urethra bougies covered with mercurial ointment. The gonorrhœa immediately ceased; but soon after a violent pain supervened in the right thigh, which obliged him again to have recourse to the hospital. The pain extended itself to the extremities, and last to the articulations of all the members, which became stiff and completely motionless. A fever afterwards supervened, attended with symptoms of mania. Mr. Farrey endeavoured to remove the most pressing complaints by venesection at the vena jugularis, by antispasmodic potions, pediluvia, and sinapisms applied to the soles of the feet; and though he succeeded in appeasing the disorder, the general pains remained almost the same. At length an injection of gonorrhœic liquor into the urethra was tried, by which the running returned; and as this became more copious, the symptoms diminished in proportion; so that after a fortnight they entirely disappeared. This second gonorrhœa was treated with mercurial preparations, in combination with antispasmodics. All the symptoms were gradually removed, and he left the hospital perfectly cured.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

I Was much pleased the other day by the perusal of an observation made by Mr. Cuming, on the treatment of erysipelas, in your last valuable Journal. On account of

its according so exactly with the plan I have been in the habit of seeing pursued, and myself adopting to a very considerable extent for the last five years; I allude to the practice of applying cold lotions in this disease, and to those more particularly which appear about the head and face, where we ought, as soon as possible, to check the complaint, particularly in females, in consequence of its so frequently disfiguring them. Mr. Cuming very justly observes, the celebrated Cullen conceived the practice to be injudicious, and recommended the principal reliance to be placed on flour; but from what I have seen of the disease within the time before mentioned, and which has not been merely a few solitary cases now and then, I am confident that this plan is by no means the best; for I do not recollect one case where the application of cold lotions were early and properly applied, but it prevented suppuration and all its ill consequences, not only in the head and face, but the extremities: in the former I have used it very freely and repeatedly, when the inflammation has run extremely high, both locally and constitutionally, and I never once found by repelling it that either phrenitis, peripneumony, angina, or any unpleasant complaint followed; indeed, to me, the propriety of their application appears very obvious, upon the simple principle of checking that inflammation, which, if allowed to go on, would probably extend to the brain, or some other important part, and in this way prove fatal. The lotion which has been used so extensively in the practice I have had an opportunity of attending to, has been the aqua. aluminis composita (P. L.) and which I think is preferable to the cerussa acetata, on account of its being a better tonic; the other I conceive to be more applicable to those kind of inflammations which more particularly require sedatives.

In a case which occurred about twelve months back, and which was particularly bad, the face being so much disfigured by the swelling as for the man's friends not to know him; he, from the first of my visiting him, used cold applications to the part; his bowels were kept open, and saline medicines administered, as the febrile symptoms seem to indicate, and he got perfectly well. This man would not bear bleeding: indeed, I have generally found, that if phlebotomy is performed in the early stage of this disease, although the inflammatory symptoms run pretty high, the patients seldom do so well as if it had been omitted; for, after it, I have almost constantly found the pulse

pulse has gradually sunk, and the part put on that degree of sluggishness and livid hue, as to require a very different mode of treatment to that adopted at first; but I don't mean to say, that because this is the case very frequently in a large town like this, that it should be so in the country; where I believe venæsection very generally becomes necessary in the treatment of this disease, and for two very obvious reasons. First, the lower class of people here (and amongst whom my practice is principally confined) live chiefly on gin, porter, and tea, and take very sparingly of animal food; and, secondly, their living in a large city where the air cannot possibly be so pure as if they resided many miles from it. This then I think will very satisfactorily explain why, in this respect, the plan of treatment here and that in the country may very properly, somewhat vary. It is a very common circumstance to find that erysipelas in the face and other parts, if considerable, will leave an œdema with a scurfiness, which was the case in the man whose case I have just mentioned; but it was entirely taken away, by giving him a grain of calomel every night, and the cortex in the day. This practice is generally adopted under such circumstances, and commonly proves amply sufficient.

Surely then, if a disease so very troublesome and indeed formidable, as erysipelas, can be checked, and suppuration prevented by this mode of treatment, and that without any risque to the person's general health, it is a very cogent reason for adopting it. We are told by that ancient writer Hippocrates, that a suppuration and sloughing of this kind, is of a very serious nature; yet he was by no means an advocate for repellants under such circumstances, for in his Aphorisms, he says, if there is a metastasis of the morbid matter from within, outward, the habit will be relieved, and the patient recover; but the sudden return of a humour inward is a bad sign, and imagined some formidable disease would be brought on in consequence. But their constant application proves this is not the case, also the advantages derived by their use to be very great, and the danger merely imaginary, that I hope, ere long, they will be universally employed; and I am sure no practitioner, who is anxious for his patient's speedy recovery, (and which, I have no doubt, is the case with every one) would, after employing it once, ever again, under similar circumstances, omit using it a second and indeed for ever after; for, as I have before stated, it prevents, if early employed, any serious mischief coming on. Whereas by sprinkling

sprinkling the part with flour, using soft emollient fomentations and cataplasms, &c. we very often find the inflammation continues to remain, the part suppurates and sloughs, and instead of curing your patient in a few days, or at farthest in a week or fortnight, he is confined for many weeks or perhaps several months.

I am well aware that many, and indeed most, modern practitioners will object to the treatment of this disease in the way I have mentioned, and will say, it is obvious that every thing which can occasion a retrocession of the morbid matter from the surface of the body must prove injurious, and therefore they contend every erysipelas should be encouraged, for that, in proportion as the external inflammation advances, does the fever subside. This argument may do extremely well to serve the purpose of the theorist, when discussing the subject in a medical society; but if he will turn his attention only a little to the practical part of his profession, and observe minutely and impartially the effects of the plan proposed, I am sure he will soon be convinced of the false grounds upon which his arguments are established.

Sometimes, and indeed not very unfrequently, in consequence of the inflammation being very great at first, and the part entirely neglected, suppuration will come on, which generally is of a phagedenic and gangrenous kind, (very seldom proving favourable) the best application, under such circumstances, seems to be the strong beer grounds and oatmeal, with bark, opium, and wine internally; and for those whose circumstances will not allow them to get the latter, porter will be found no contemptible substitute; during the separation, the sore may be sprinkled with a powder composed of equal parts of the pulv. gum. myrrh. and lap. calaminaris; or instead of the latter, the cinchona may be employed; and over this the poultice is to be laid. All greasy applications are to be avoided, more particularly in the early stage of the disease, for they will invariably be found prejudicial. When the part has become perfectly healthy, the poultice is to be discontinued; but frequently the use of the powder may be persevered in with considerable advantage, and over it dry lint and a common pledget, and commonly this will be all that is necessary to complete the cure.

I embrace this opportunity of mentioning the good effects I have seen, from giving the *zincum vitriolatum* in the cure of intermittents, and which medicine I was induced to employ from the recommendation of the gentle
man

man whose name I have before mentioned. I have only had an opportunity of giving it in two cases, the first of which was a remarkable obstinate one, and had bid defiance both to the cortex and solutio arsenici; indeed, the subject was a very unfavourable one, for he had repeatedly laboured under the same disease while abroad as a soldier; he had also been a hard drinker of spirits, by which his constitution had been much shattered. Under these unfavourable circumstances, I began with the above medicine, and persevered in its use in the manner directed by Mr. C. and I am happy in saying the man had not one paroxysm after its first administration. The other case was of a much milder type, and the subject by far more favourable in every respect. In this man, I began with it from the first, and it answered my most sanguine expectations; indeed, I have much pleasure in acknowledging that I always feel great satisfaction, and receive considerable improvement, by the perusal of the above Gentleman's very valuable practical observations from time to time, and which, I trust, he will afford me frequent opportunities of repeating,

I am, &c.

London, Nov. 12, 1804.

ROBERT COOKE.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

IT is incumbent on me to observe, that the air-pump water-bath, although unknown to me, had certainly been suggested to remove poisons from the surface of the body, before I sent in my last communication; I, therefore, claim no more merit respecting the mere hint which I laid before you, than this, that, where a common air-pump is at hand, any other kind of vessel, furnished (in a manner that needs no description) with a proper stop-cock, may possibly prove always successful, if instantly applied.

To do justice to the author, I shall quote the following passage from the work itself.

“ It may not a little surprise some of my readers, that I have not expatiated on the efficacy of the apparatus in the removal of animal, vegetable, and mineral poisons recently applied to the system; especially, as the extraction
of

of poison from a wound originally gave rise to the invention." (See Dr. Blegborough on the air-pump vapour-bath, p.136.)

The whole of my last short, and, I confess, very hastily written letter, was composed in a *conditional* sense. Nothing in it amounts to an assertion; the whole was meant to be, and, I am confident, will be found to be, merely *recommendatory*; I cannot, therefore, either retract a single syllable, or answer any *public* question respecting its contents.

I know my letter has been most miserably garbled. A studied exordium with "*no errors should be permitted to pass unnoticed; the wide ocean of medical science; the dangerous rocks; wild and extravagant fancies; speculators in physic, &c.*" must prepare the reader to give credit to the author, and to follow him implicitly, if nothing be questioned respecting the text.

I have not the least doubt but that whoever has read the comment upon my letter, must suppose that I expect complete success from the application of a cupping-glass, even when the *barking, biting, anxiety, fever, and dread of swallowing* are hastening the patient to his grave. This would indeed be an *immediate cure*.

The commentator must have seen what I meant by the general tenor of the whole letter, besides this sentence, "*the moment an accident of this kind has happened is evidently the only period to apply the glasses with any prospect of success.*"

The patient *cured* by the commentator does not appear to have been diseased, or the puny history must be defective. It does not appear that the *pointer* dog was really capable of communicating *hydrophobia*, for the animal, with all the *unequivocal* symptoms, did not die of the disease; perhaps the poor creature was shot, or hanged and quartered, and then can tell no tales.

Amongst some other remarks, which deserve to be studied, I observe in the same number of the Medical and Physical Journal, p. 387—391, that Professor Rossi was deceived, and why not also our commentator? Another may also be seen, of two examples of "*persons dying under hydrophobic symptoms from biting their own fingers, in a paroxysm of anger!*" How opportunely these observations occur in the self same Journal; they appear not only as a *preventive* but as an *immediate cure*.

I observe some singular opinions respecting the *double effect* of alkali, which I could not comprehend, but on which

which one might have said more than would be palatable ; perhaps animal poisons are *acids* : if so, here is a new field opened to the chemist, if he be not afraid to “ turn his mind to surgery.” But, “ *ne ultra crepidam*.”

I have considered, that to contend with a competitor so powerful would be madness. What chance could I expect, to wrestle with a physical Hercules? with, not only a member of the Royal College of Surgeons, London, but who can add the strength of an apothecary, of a man-midwife, and of a vendor of drugs, chemicals, &c. to whatever besides he may desire to possess !

The compliment paid to me on some observations, which appeared in your Journal for May and July, I cannot accept—the donor can be no very perfect judge of *nomenclature*, who confounds *calx cum kali puro* with what is commonly called *lapis infernalis*. How far this accords with “ preparing prescriptions with accuracy,” I leave to the judgement of others.

I am, &c.

Long Acre, Nov. 14, 1804.

JOS. HUME.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

IN the last Number of the Medical and Chirurgical Review, the account of the Kensington case is considerably corrected. It is there acknowledged, that Mr. Cullerne never saw the patient after the fourth day ; and I have the authority of that gentleman for asserting, that he did not form any decisive opinion on the case ; on the contrary, he desired the child might be brought to him again for this purpose.

The author of the account in the Med. and Chir. Review confesses, that Mrs. Meredith prevaricated in her evidence ; and endeavours to reconcile it to reason by saying, that she was *minutely* and *unexpectedly* questioned on points of some nicety, with which she must be supposed not to have been familiar. The public, however, will judge whether this is not the best mode of eliciting the truth ; and it must be recollected, that during the first examination, she positively asserted the colour was not black, and persevered in that assertion.

(No. 70.)

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It was an easy matter for her afterwards to learn what the colour of the cow-pock scab is, either from conversation with her numerous visitors, some of whom were not very friendly to vaccination; or from some vaccine patients in the neighbourhood, whom she repeatedly saw about that period.

In the account alluded to, the most material circumstance is artfully suppressed; namely, that the pustules were rubbed off within a few days after their appearance. "On the above evidence," it seems, lame and imperfect as it is, "the public may judge for themselves," whether the patient had the cow-pock. It is easy to conjecture, what opinion the author of the article alluded to wishes the public to form; but they will be cautious how they believe one, who has already tried to deceive them. *Stulto non creditur etiam verum dicenti.*

A person, assuming the style of an Editor, in the same number of the Medical and Chirurgical Review, affects to fear, what he evidently hopes, that the cases which have lately occurred, will induce many families to prefer the inoculation of the small-pox to vaccination. This person, who is probably the same that drew up the false account of the Kensington case, appears to be envious of the well-earned fame of Dr. Jenner; and anxious to pluck the laurels from his brow. He would sacrifice vaccination to accomplish his purpose. He thinks vaccine inoculation cannot be established by Dr. Jenner, and a few of his adherents. He thinks Dr. Jenner's adherents are *interested*. They would, however, have given greater reason for that reproach, if they had been so mean as to sell cow-pock matter.

This Writer, and a Reviewer in the same work, have drawn a conclusion rather unfavourable to vaccination from Dr. Rollo's report of experiments at Woolwich. From the same premises, a Reviewer in the Medical and Physical Journal has drawn a favourable conclusion. Having been requested by Dr. Rollo to observe the progress of those cases, I deem it incumbent on me to point out an inaccuracy in his statement.

When I received from Dr. Rollo a letter mentioning the alarm created in his mind by the effects of variolous inoculation on those whom he had before vaccinated, I wrote to him a letter expressive of my opinion, that his alarm would prove groundless. Mr. Knight, to whom Dr. Rollo also applied, wrote to him an answer to the same purport.

When

When I waited on Dr. Rollo, I remarked to him and several other gentlemen present, that the local pustule of the patients under the test of variolous inoculation was different from that which takes place in persons who have not had the cow-pock or the small-pox; and that it was not surrounded by a cluster of pustules, as it is in those who have not undergone either of those disorders.

This remark was not controverted at the time; I could not, therefore, but be rather surprised at seeing it stated in Dr. Rollo's Report, that in one of his cases a cluster of pustules appeared. It is true, the local affection was rather more than common; probably owing to the heat of the weather, and to the parts being much handled.

In order to ascertain with as much precision as possible the particulars of these cases, I wrote to Mr. Butler, surgeon, of Woolwich, whose children were the subjects of two of them; and received an answer to the following effect:

"The arms of these children were frequently examined by medical men, which must have produced some irritation; the children themselves more particularly irritated them by scratching."

Mr. Butler says, there were several pustules near the inoculated part, in Serjeant Gloag's child; and that, when examined with a glass, they appeared to contain a *watery fluid*.

This proves that they were vesicles, the mere effect of cuticular inflammation; a pustule contains pus. It is much to be wished, that medical men would be a little more accurate in their discriminations.

Mr. Butler observes, that he feels it difficult to describe the few pimples, or pustules, which appeared on his own child. "When first noticed they felt hard; and, on the third or fourth day, when examined with a glass, they appeared to contain a small quantity of a watery fluid. None of them were ever so large as those which occur in the small-pox."

Notwithstanding Mr. Butler speaks with so much modesty, I defy the most able nosologist to give a better idea of a miliary eruption. Sauvage says, it is "an eruption of blisters not larger than a millet seed." Linnæus calls it "a round papulous eruption." Vogel describes it to be "pustules of the size of millet seeds, full of serum, which is at first limpid, afterwards whitish, and of a pearl colour." Sagar represents it to be "an eruption of blisters seldom larger than a millet seed." He says, "they remain

on the skin four, five, six, seven, nine, eleven days, or more, and terminate in fine branny scales." Cullen tells us, it is "a small papulous eruption; and that, in a day or two, a very small white pustule, of short duration, is visible on its apex."

Nothing can bear a more exact resemblance to the eruptions which are continually mistaken for the small-pox; particularly by those who make experiments with variolous matter. In confirmation of this opinion it must be recollected, that matter taken from such eruptions never produces any specific disease. *Ex nihilo nihil fit.*

Dr. Rollo and Mr. Butler both informed me, that in the cases where variolous matter was inserted as a test, the pustule appeared earlier than usual. The same, it is well known, commonly happens in those who have previously had the small-pox; but to this rule there are many exceptions.

Dr. Rollo, in his letter to me, stated, that he thought his patients going on in the manner described by Baron Dimsdale in his first twelve cases. This was to me a strong argument that they were insusceptible of the general small-pox, and that the variolous inoculation would prove abortive; as it appears to have done in almost every one of the twelve cases related by Baron Dimsdale. That great inoculator has described the effects of variolation in those who have already had the disease; but he did not know how to account for them. This was reserved for Dr. Woodville, and other later authors.

It is now well understood, that the early efflorescence, and the premature pustule, such as are to be met with in the works of Baron Dimsdale, Mr. Goldson, Dr. Rollo, and others, are nothing more than the mountain in labour; and they would probably terminate in the same manner, did not the troublesome itching attendant on such cases provoke the patients to scratch their arms, and curiosity tempt practitioners to press them; hence a train of local and general symptoms in proportion to the injury received.

In Dr. Rollo's two first cases, there was an efflorescence round the puncture, about the size of a sixpence, on the second day. In the third case, the elevation and inflammation of the arm were still more remarkable than in the two former. On the eighth day the inflammation nearly extended to the elbow, and upper part of the arm; and over the whole side. It is no wonder the child was feverish; and, although it had no eruption, it may be said to have

have escaped as through fire. So far is the variolous test from being a matter of indifference, as some people pretend.

In the fourth case, the child was inoculated with variolous matter in the evening; and by the next morning, his arm was inflamed nearly to the size of a sixpence. He complained of its itching much; and said it was very sore. In the evening the inflammation was greatly increased. On the third day it was still farther increased; and had considerable hardness round it. On the fourth day the extent of the inflammation was three inches by two. The child complained of pain under his arm, and in the evening was much indisposed. On the morning of the fifth day the inflammation was abated, and the child much better. This was one of Mr. Butler's children, part of whose case has already been related. Several of the vaccine patients whom Dr. Rollo inoculated with variolous matter, were affected with general indisposition; reasons for which may easily be found in the violence of the local inflammation.

In the fifth case there was a considerable inflammation on the arm by the next morning, and it increased till the fifth day. On the ninth day it again increased considerably, attended with all the symptoms of fever, and a convulsion. Some small eruptions appeared near the inoculated part; but none that could be called pustules; otherwise matter would have been taken from this child, as it was from his brother, although it proved ineffectual for the purpose of inoculation.

These are sufficient specimens of Dr. Rollo's experiments with variolous matter after vaccination. Any one who examines the result of his experiments, in children who had not previously undergone vaccination, will perceive a material difference in them. In these cases there was nothing doubtful, nothing equivocal; but an inflammation more tardy, and pustulous eruptions that bore every stamp of the small-pox.

Upon the whole, Dr. Rollo is inclined to think, that the cow-pock is endowed with a power of resisting the small-pox; but Mr. Butler is a more decided advocate for the practice. He assured me, when I was at Woolwich, that nothing had so strongly convinced him of the efficacy of vaccination, as the result of the preceding experiments. In his letter to me he declares, that he has a perfect confidence in vaccination; and thinks it his duty to recommend the practice to the public.

Dr. Rollo having excited a local variolous pustule in Mr. Butler's children, inoculated other children with some of the matter thus produced, and excited the small-pox in its usual form. This, as he confessed to me, was one circumstance which staggered him. In his report he says, these children were inoculated from pustules on the arms of those who had undergone vaccination; but in the analysis of his publication, in the *Med. and Chir. Review*, it is justly remarked, that it should have been stated, whether the matter was taken from the inoculated part, or from one of the secondary pustules. I therefore think it necessary to mention, that it was taken from the inoculated part. "It has been ascertained," as the Reviewer truly asserts, "that a pustule may be excited in a person who has gone through the small-pox; and that the matter of such pustule is capable of giving infection."

Of this I informed Dr. Rollo; and, at the same time, expressed my regret, that he had propagated the infection thus generated. It was this circumstance that spread an alarm far and wide; and gave rise to the remark I had made in my answer to Mr. Goldson, previous to the publication of the Review in question, and even of Dr. Rollo's Report. It is as follows:

"The possibility of having a local variolous pustule after the small-pox, or the cow-pox, having been often ascertained, I hope that in future, when gentlemen meet with such cases, they will not deem it necessary, or even justifiable, to put the matter to the test, by inoculating with that deadly poison any persons who have not yet had the disease."

"Such an experiment, when matter is taken from a pustule in one who has been previously vaccinated, not only tends to spread the contagion of the small-pox, but also to excite a doubt of the efficacy of vaccination in the mind of the public."

Dr. Rollo took matter for inoculation from two secondary eruptions on Master Butler, but it proved unsuccessful. Had any other eruptions appeared more promising, there is no reason to doubt that he would have taken matter from them also.

The writer in the *Med. and Chir. Review*, speaking of the cases in Fullwood's Rents, says, "These cases have unfortunately followed close on the heels of the unfavourable ones of Dr. Rollo, a man of acknowledged ability as an observer." Those who acknowledged the ability of Dr. Rollo as an observer, must allow that his evidence is in

In favour of vaccination; since he was not able to observe a single variolous eruption, in any one of those vaccine patients whom he inoculated for the small-pox.

The Reviewer of Mr. Dunning's pamphlet, in the same number of the Review, has provided an antidote for the poison, which this malignant writer is endeavouring to instil into the public mind. He very judiciously remarks, that in the aforesaid "pamphlet, several cases are given at length, where the patients were subjected to variolous inoculation after having been vaccinated from three to five years before. *The effects corresponded very nearly with those observed by Dr. Rollo to have occurred in his experiments; that is, a good deal of local inflammation was excited in the inoculated parts; and in some an eruption of pimples took place, preceded by constitutional affection. The precise characters of small-pox were, however, wanting.*"

This proves, that the statement of the other writer in the same Review is a misrepresentation; which, "*following close on the heels*" of the misrepresentation of the Kensington case, indicates a deliberate design to calumniate vaccination. Whether the author of those misrepresentations is an original self-interested opponent of the practice, or a jealous rival of Dr. Jenner, I shall not pretend to determine; but I trust, that one channel at least will always be open, in which the calumnies of prostitute prints may be refuted; otherwise we may see another string of falsehoods, such as lately appeared in the Times, where it was asserted that a child was vaccinated two years before she was born.

It cannot have escaped notice, that in the narrative alluded to, the names of some respectable practitioners were joined with others of a very different description, in order to give currency to the statement; but this was done without their consent.

I now beg leave to offer a few observations on Dr. Macdonald's Answer to Mr. Goldson, published in your Journal for October; which I consider as a valuable acquisition to Medical Science. In some respects, however, the opinions of Dr. Macdonald are different from those which are commonly entertained.

He thinks it still doubtful, whether it is requisite that the matter of grease should pass through the nipple of the cow, in order to produce the desired effect in the human body. This point, I apprehend, numerous experiments,

particularly those of Drs. Loy, Sacco, La Font, and De Carro, have satisfactorily decided in the negative.

Dr. Macdonald is of opinion, that the matter of grease, if inserted into the nipple of a mare, would produce nothing. He says, the experiments instituted by Professor Vibourg have clearly proved that the grease is not infectious in the horse. A negative, however, is not so easily proved; otherwise we could demonstrate, that the cow-pock does not originate from grease. The difficulty lies in procuring the genuine matter of grease in an active state. This matter succeeds, when inserted into the nipple of a cow; and the late Mr. Davy shewed Dr. Jenner and me an instance, in which vaccine matter succeeded when inserted into the heel of a horse. I therefore see no reason to doubt, that active equine matter would succeed, when inserted into the nipple of a mare.

Dr. Macdonald says, medical records abound with cases of spurious eruptions, produced by the variolous contagion. Among these spurious eruptions he reckons the chicken-pox. To such an hypothesis, I conceive, the members of the medical profession in general will not assent. I have alluded to it in my Treatise on the Cow-pox, p. 943 and 975; but little expected, that it would have met with so respectable an advocate as Dr. Macdonald.

Dr. Macdonald contends, that several cases of eruption subsequent to vaccination, found in Dr. Woodville's Report, have erroneously been taken for the small-pox from previous infection; of which he thinks the efflorescence a sufficient proof. I have, however, seen exceptions to this rule. Dr. Macdonald thinks the eruptions which happened subsequent to vaccination, in the practice of Dr. Ballhorn and Mr. Stromeyer at Hanover, were the fruits of exposure to variolous infection, since the small-pox was in the same neighbourhood, and even in the same house; but he considers the disease thus produced, to have been the chicken-pox.

That the pustulous disease produced in the vaccine patients in the Small-pox Hospital was the small-pox, I can safely aver; matter derived from that source having excited the small-pox in my own practice, and in that of many others; but, with regard to the Hanoverian cases, I must confess, upon minutely reconsidering them, some appear to have been variolous, and some varicellous. In the former there was a hard base, and a suppuration at the apex; in the latter a vesicle.

That the former was really the small-pox could not be proved, unless matter had been taken and used for inoculation;

lation; but every thing which I have observed relative to the chicken-pox convinces me, that the hypothesis of its originating from degenerate small-pox matter is ill founded. This idea probably took its rise from the very frequent mistake of the chicken-pox for the small-pox.—Hence virus taken from the former, and inserted instead of the latter, producing its like, induced practitioners to suppose, *or to pretend*, that the small-pox sometimes degenerates into the chicken-pox.

Were this the case, the chicken-pox, as an epidemic, would more commonly follow than precede the small-pox; a circumstance which I have never been able to ascertain; and I am fully persuaded, that one of those diseases as often happens first, as the other.

HAVING lately seen a coexistence of the chicken-pox and the scarlatina, I embrace the present opportunity of recording the fact. It occurred in the family of Mr. Child, in Barlow's Buildings, Long Lane, Southwark. This case afforded an additional proof of the compatibility of two morbid actions; both diseases having appeared at the same time, and pursued their natural course. The scarlatina was extremely violent; but terminated well.

SOME gentlemen, rather sanguine in their hopes, and ostentatious in their reports, wish the world to suppose that they have extended the practice of vaccination to New South Wales; letters lately received from Mr. Savage, late assistant surgeon of the Glatton, now settled at Parramatta, prove that this desirable object is not yet accomplished.

From one of his letters, received by Mr. Harwood, formerly surgeon of the Providence, it appears, that on his leaving England, he intended to have preserved his vaccine matter by inoculating passengers on board the ship; but, owing to a mistake or misrepresentation, this privilege was afterwards refused.

This letter was dated Rio Janeiro, December 8, 1802. He there tells us, that the medical practitioners, and inhabitants in general, wished much to have vaccination introduced among them; but he was afraid to open the packet of matter he had received from me, as they were to remain

main on that station only a week, lest it should be injured by the admission of air. This I mention, for the sake of informing any persons who may in future touch at any distant port, that a week, and even a much shorter time, is sufficient to excite a fresh supply of matter; which will not only enable mariners to leave this boon behind them, but also facilitate its conveyance to the place of their destination.

By a letter which I received from Mr. Savage, dated Sydney, New South Wales, May 13, 1803, I was informed that he had commenced his experiments with vaccine virus; but from subsequent intelligence it appears, they proved unsuccessful. It has been commonly supposed, the small-pox has never visited that remote region; but Mr. Savage declares there are sufficient traces of it among the natives, to warrant him in believing it has existed there. Should it ever appear in that part of the world again, he has no doubt but, from the heat of the climate, and the intemperance of the inhabitants, its ravages will be dreadful; unless prevented by the grand prophylactic which has immortalized a Jenner.

The last letter received from Mr. Savage, dated Parramatta, February 29, 1804, states, that Dr. Anderson was about to send a surgeon from Madras, with vaccine virus, and some children; in order to introduce vaccination into New South Wales. This plan holds forth the most flattering prospect of success.

Mr. Savage notices one circumstance relative to the climate of New South Wales, which is equally singular and surprising. The changes from heat to cold, and from cold to heat, are sudden and frequent; insomuch, that it is not uncommon, during the land-wind, for the thermometer to stand at upwards of 100° in the shade; and by a sudden shift of wind to the southward, for it to fall instantly to 50° or even below it. Yet these changes are not found to be productive of any injurious consequences. The climate is healthy; and the soil fruitful.

I am, &c.

JOHN RING.

New Street, Hanover Square.

To

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

IN the last Number of the Medical and Chirurgical Review is an Article, stating, that when I saw the child, who was the subject of the Kensington case, on the fourth day after I had inoculated him with cow-pock virus, "I expressed myself satisfied with the appearance of the arms."

Had the author of that article taken the trouble to call upon me, I should have informed him, that I did not, nor could I consistently, speak decidedly on that point, at so early a stage, and that nothing could be more contrary to my habit, or disposition, than such hasty decision on matters of consequence.

I requested the child might be brought to my house on the Monday following, that is, on the eighth day. He was brought on that day, but not until the time appointed was considerably past, and I was unavoidably absent from home. The reason of my directing them to bring him to my house in Lower Eaton Street, Pimlico, was, because it lays considerably nearer to Kensington than the Castle Street station, where the child was inoculated. The parents, trusting too much to their own judgment, and the improperly obtruded opinions of other people, thought the child secure, and did not send him to me again, so that I did not see him afterwards till the evening before his decease. He was then sinking under the confluent small-pox. I called for a candle, and closely examined his right arm, but could trace no mark of his having had the cow-pock. I could not examine the left arm, without greatly disturbing him (which I thought improper in that advanced stage of the disease) because he lay upon his left side; however, I did not consider that as of so much consequence, because I invariably inoculate on the right arm; sometimes, though very rarely, from timidity in the subject, or other material intervening cause, I omit to inoculate in the left; therefore having found no leading mark on the right arm to determine from, and having afterwards made the most minute inquiry into all circumstances, I am of opinion, that the vaccine inoculation never took proper effect.

This being a true statement of the case, I have to request that you will do me the justice to insert it in the next Number of your Journal.

I am, &c.

Nov. 21, 1804.

J. CULLURNE.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

THE estimable character on whom it has fallen to discover, and to reveal to a suffering world, the means of escaping the pestilential horrors of small-pox, was I think peculiarly happy in detecting the existence and the causes of *spurious* pustule.

On the subject of *spurious* pustule, &c. I offer you the following Address to the Governor of Minorca, written, as will appear from its contents, when I had not yet acquired that experience which I have since obtained.

"TO THE GOVERNOR FOX.

"John Walker, M. D. associated with Joseph Head Marshall, M. D. in an order from the Admiralty to take a passage on board of the *Endymion*, for the purpose of bringing to this part of the world the new discovery of the cow-pox inoculation, thinks it his duty to return thanks, on the part of himself and colleague, to the Governor at Minorca, for his liberal attention to themselves personally as well as to their mission, and to inform him of their proceedings.

"When the native magistrates, the Jurats, had given them an audience, at the instance of the Governor, and expressed their approbation * of the new practice, they immediately proceeded to inoculate the troops and seamen of the Navy, &c.

"Other men and children attached to the British service have been inoculated, &c.

"Candour obliges us to confess, that the disease has been produced in but a very partial way. The effect upon the system has not been so great as we have witnessed it in England; it passed away in about half the time. In many instances, it has not been produced at all.

"Information of this seemed due to the natives. Their safety might be concerned in it. The honour of the medical profession, as well as individual character, should be supported; and it ought not to appear to them, that the British government had in any way patronized a species of charla-

* Without this the Governor told us he could not, by treaty, consent to the inoculation being introduced into the island.

charlatanerie in place of a practice important to humanity, and which, originating in England, is now spreading itself rapidly to different parts of the world.

“ The explanation of the cause of the apparent degeneration of the disease, or of the production of a new one, was attempted; and they were fully satisfied. They were informed that threads impregnated with vaccine virus were brought from villages in Gloucestershire, and matter, still more recent, from London; that the latter was used successfully in the Endymion; that hence fresh virus was obtained, which effectually produced the disease at Gibraltar; that the disease was also produced in the Florentino, on her way from Gibraltar to this island; but that here we in vain attempted to excite the disease by the virus brought from England, as well as by that more recently collected on the way; that we then brought a boy from on board the Florentino, and inoculated the children at the Foundling Hospital with matter taken from his arm, and that this produced the diminished effect already mentioned; that on our witnessing this new appearance of the disease, we were alarmed, and concluded, that one of us should return to the Rock, to obtain fresh matter, as the medical men there had undertaken to keep up the disease as well as to preserve the matter of it; or, in case of failure there, to proceed to England; that the other should continue to attempt to excite with the yet untried threads of virus; that this attempt has been abortive, and that nothing but the diminished or degenerated disease had been propagated in this island. Time may fully determine whether this slight affection will at all fortify the system against the small-pox. My opinion is, that it may moderate the effects of it, although I fear that it will not entirely prevent it.

“ As the confluent small-pox has lately been raging in the island, I thought it right to recommend it, remarking, that it might be, in comparison of the fully marked cow-pox, what one coat of lime would be to a wall which they wished to thoroughly clean and whiten (pointing to a clouded or stained part of their town-hall) would be to a full proper whitening.

“ But whence arose the failure of the virus to which we suppose the present disappointment referable? On packing up that which we obtained since our leaving England, it happened that in sealing it up a degree of heat was applied, which at the time excited some fear that the matter might be injured. The fear seems to have been realized. As to the failure of the virus brought from England, we seem obliged

obliged to refer it less to its age than to some incautions exposure to the air.

"But why was the virus taken from the sailor-boy ineffectual to produce a disease bearing the character of the undoubtedly genuine cow-pox? The lad was a Spaniard; we did not understand each other's language. First, Perhaps he had had the small-pox. Secondly, As we only tried him through failure of what we had depended upon, perhaps we, under fear of utterly failing, had taken the matter from his arm at rather too late a period, when the limpid virus had passed to a state of pus. Or, thirdly, He might have some other disease upon him. It is a fact that there was at last discovered on him a swelling with considerable discharge, and this perhaps prevented him from receiving the disease in its full force, and the matter of consequence, taken from him, from giving it."

Aboard of the Alexander, Mahon Harbour, 19, x, 1800.

As I had hitherto only practised the Jennerian inoculation in the vale of Gloucestershire, which had given it birth, the spurious pustules which arose in Minorca were the first I had seen. I however yet believe, that unequivocally spurious, or degenerated, cow-pock, produces all the effects which have lately been attributed to the true; viz. a kind of partial and temporary protection against the violence of small-pox; and with this persuasion on my mind, I can only refer every *failure* to the use of improper matter.

I informed the Jurats, that on our recovering the matter, my colleague or myself would return to the isle, or that we would send it to the surgeon-general, who had accompanied me to the hall, and who promised to introduce it. On Marshall's rejoining me at Malta, he informed me, that immediately on his return to Minorca from Gibraltar, he re-inoculated an officer's child with full effect; that he afterwards submitted it to variolous inoculation without effect, and that the natives assured him, that while several had died there of the small-pox, even under inoculation, those who had had the imperfect cow-pock had been very little affected with the small-pox.

I suppose we shall shortly have the Report of the very respectable association on the case at Fulwood's Rents. Will they find it to have been varicella, wasser pocken, diminished small-pox after spurious cow-pock, or what? In the bills of mortality for August 21, October 2, and 16, I find three deaths attributed to chicken-pox. If these eruptions, whatever they were, had been after vaccination

or

or vaccævaration, they must have been fatal cases of small-pox after cow-pock.

Lately called on to see a case of variola after vacciola, I found a child covered with small-pox, and immediately declared it to be such. On examining its arms, and not finding any cicatrix, I informed the parents that it had never had the cow-pock. Another child was shown to me, on whom there was distinctly characterised cicatrix; I told them that this afforded so strong a presumption that it was fully protected, that I would recommend its sleeping with the small-pox patient. They have slept together from the beginning, said the father and mother. Some weeks have now elapsed, the child's protection stands confirmed; and the mother now recollects, that the Doctor took a great deal of matter from its arm, but none from the one which has taken the small-pox.

A father called on me a few days ago, and told me, that of two children which I had inoculated last spring, one was now covered with small-pox, the other sickening; and that he was advised to advertise it. On consulting the Register, I found them both marked perfect cases; and told him, it was impossible for either of them to be infected with small-pox. I immediately called on our Vice President, John Ring, and challenged him to come and detect my failure, remarking, that I could scarcely expect my own report, if favourable, to be confidently received. He had the goodness to accompany me, and on our seeing the child, he immediately declared it chicken-pox.

The applications for matter at the Central House, are more numerous than ever; there is not yet any falling off in the inoculations.

Yours, respectfully,

Salisbury Square, 15 xj, 1804.

JOHN WALKER.

TO DR. BATTY.

DEAR SIR,

WHEN I last had the pleasure of seeing you in London, I promised to give you an account of any surgical instruments that I might be fortunate enough to invent or improve. In the mean time, I enclose drawings of several, with short descriptions of them. In case you are of opinion that

that they are likely to prove useful, I will thank you to make them publicly known through the medium of the Medical Journal.

Yours, &c.

Verdun sur Meuse, May 30, 1804.

THOMAS CLARK, M. D.

The tourniquet represented in the drawings, fig. 1, 2, and 3, is much more simple, smaller, lighter, and equally efficacious with any hitherto invented, and may be procured at a very trifling expence. In fact, it furnishes a means of easily tightening a piece of tape or leather strap with a lever. The buckle and tape, represented in fig. 1, being applied to a limb in the common way, the loose portion of tape, next the tongue of the buckle, is to be drawn somewhat tight, and placed with its edges opposed to the centre of the holes of the instrument, as represented in fig. 2. The shortest portion of the lever is now to be introduced into one of the holes, so that its slit, represented in fig. 3, may receive the edge of the tape; then push it along until its extremity passes through the hole in the opposite side of the instrument. The tongue of the buckle being now disengaged from the tape, the lever is to be turned round by means of its movable handle, (a) in the same direction with the points of the tongue of the buckle. When the tape is sufficiently tight, the lever may either be allowed to remain or taken away, as may be found most convenient. By turning it once round in the opposite direction, it can easily be withdrawn. Consequently, this tourniquet is peculiarly well adapted for the army, as, during an engagement, one lever will serve as many tourniquets as an individual can apply. Hence the carrying a considerable number of these instruments becomes a very easy matter, their weight and size being thus rendered very trifling.

Being of opinion that an instrument capable of compressing any of the larger blood vessels of the extremities, while, at the same time, the blood should be permitted to circulate in the parts beyond the instrument, by means of the other vessels, might, on many occasions, prove extremely servicable, I have invented the instrument represented in fig. 4.

Let it be supposed, that the humeral artery is wounded at the flexure of the fore arm, by a lancet in the operation
of

of blood-letting. In this case, it appears to me more than probable, that if the artery was soon afterwards compressed, at a little distance above the wound, and kept so for several days, the circulation in the smaller arteries being in the mean time in a great measure uninterrupted, that the wound in the artery would heal. When it should be deemed necessary to remove the compression, I would recommend doing it in a very gradual manner. Thus, for the first day, let the compression be so regulated as to permit a fourth part of the usual quantity of blood to pass under the cushion; on the second day, a third part, and so on, provided there was reason to believe that the wound in the artery had perfectly united; if not, the entire compression must necessarily be again had recourse to.

The instrument represented in fig. 4, seems to be well adapted for compressing the humeral artery, or any other that can be easily pressed against a bone. It consists of a semi-circular portion of steel, (the diameter of which should always be greater than that of the limb to which it is to be applied) a screw with a soft cushion attached to it, a piece of tape, and a buckle. The tape ought to be a good deal broader than common, or a large cushion, fixed to a thin plate of metal, should be applied diametrically opposite to the screw, and retained in its place by the tape.

The cushion being applied, by means of the screw, to the internal plate of the instrument, let the semi-circle be placed on the arm, so that the cushion may be immediately over the artery; then buckle the tape with considerable tightness. The screw is now to be turned gradually round, until the circulation in the artery is stopped. It must evidently appear, as the semi-circle does not touch the arm, that the circulation under it, except where the cushion presses, will be totally uninterrupted. However, if the cushion is only applied with such a degree of force as is just sufficient to stop the circulation in the artery, I think it must also be granted, that the circulation under the tape or opposite large cushion, will also be tolerably free. Suppose the surface of the tape or large cushion to be four times greater than that of the small one, and that the pressure of this last is barely sufficient to stop the circulation in the artery, I think it must evidently appear that the degree of pressure made by the tape or large cushion, on any one point, will be only equal to the fourth part of that produced by the small one on an equal space; their surfaces being in the ratio of one to four, agreeably to my supposition; that is, supposing the pressure to be equally

(No. 70.)

N n

powerful

powerful throughout their surfaces. Therefore, it seems reasonable to conclude, that in such a case as now mentioned, the humeral artery might be completely compressed, while, at the same time, the circulation in the fore arm and hand might be supported with nearly as great certainty as after the common operation for aneurism.

The same reasoning will apply to wounds of the extremities, attended with hæmorrhagy, which cannot be readily stopped by the usual dressings. The compressing of the principal artery or arteries that supply the part or parts with blood, from whence the hæmorrhagy takes place, undoubtedly, in most cases, will stop the bleeding; but if it should not be stopped by these means, and the proper application of dressings, a similar instrument may be applied below the wound; and thus certainly the discharge of blood would be kept within due bounds.

In many instances of wounds, it is probable that the application of these instruments, for a few hours, will be sufficient. However, the length of time must necessarily depend on the nature of the wounds. At all events, if the hæmorrhagy should recur, after the compression has been removed, either in part or entirely, the complete compression must be renewed.

The instrument alluded to is only calculated to make pressure on arteries, when they can easily be pressed against a bone by means of its cushion. On this account, I have invented another, or rather improved this instrument, by adding another semi-circle with a screw and cushion. A hinge, by which it may be readily opened and shut, is likewise added, as may be observed in fig. 5. This instrument, from its having two screws and cushions diametrically opposite, can be so managed as to compress arteries in any part of the extremities. In fact, this instrument, in a great measure, supersedes the use of the former, as one of the screws and cushion are constructed so that they may be taken away at pleasure. That part of the instrument opposite the remaining screw, may then be covered with cloth, or have a large cushion fixed to it, in order to produce an effect similar to that produced by the instrument first described.

Before concluding this subject, I consider it proper to mention, that it seems to me highly probable, that the judicious management of these instruments may be very useful in military practice, and may frequently preserve the use or even save many limbs.

Some time ago it occurred to me, that musquet balls might,

might, in many instances, be extracted from wounds, by means of a steel hook, such as represented in fig. 6. The under part of the hook should form an acute angle; however, not so sharp as to injure the soft parts, and its upper part ought to be a quarter of an inch long and an eighth part in breadth, having a curvature and excavation corresponding to the shape of a musquet ball. If this instrument was cautiously introduced into a wound until it should reach the ball, it seems very probable that it might be made to pass beyond, and then turned behind the ball, in such a manner, that by a few efforts the ball could be readily extracted, namely, by withdrawing the instrument cautiously, and endeavouring at the same time to keep the hook behind, and as near its centre as possible.

I have lately invented another very simple instrument, consisting of a flat silver canula, curved at one end, together with a pliable elastic portion of steel, having likewise a similar curvature at one extremity. The whole of the steel should be of such a size as to be made to pass readily into the canula, excepting a very small portion, at its curved extremity. This portion should be constructed so as to prevent the extremity of the canula from meeting with any resistance from the soft parts when introduced into a wound. The degree of pliability of the flexible part of the steel, should be such as to render its passage through the curvature of the canula quite easy. The curved portion of steel, though inflexible, will readily pass into the curvature of the canula; their curvatures, agreeably to my supposition, being made to correspond with each other. The breadth of this instrument should be about a quarter of an inch.

Let us suppose that this instrument is placed so that its straight part forms a *tangent* to a diameter of the ball, parallel to a plane passing through the surface of the external wound, as represented in fig. 7, and that the curvature of the canula is equal in length to an eighth part of the ball's circumference (a b). Now, let us imagine, that the curved portion of steel is made to project beyond the canula for an equal distance, and it is evident that the curvatures of the canula and steel together will be equal to a fourth part of the circumference of the ball (a d). Hence I think it reasonable to suppose, that this instrument may in many cases prove extremely servicable, and will render the use of forceps frequently unnecessary.

Instead of a silver canula, it is probable that a piece of inflexible steel with grooves on its edges, in order to receive

the edges of the other part of the instrument, and thus to retain both portions intimately applied together, would answer better, as the instrument would be rendered thinner, and likewise more closely applied to the ball.

In fig. 8, is represented a probe made of a spiral steel wire, with a large round point. This probe may be useful in finding out the direction of sinous sores, as it readily bends in every direction, and, at the same time, possesses a sufficient degree of rigidity. When it touches a musquet ball, or any hard substance, the same kind of sensation is communicated to the hand, as when a common steel probe is rubbed against a hard substance.

OBSERVATIONS ON THE SALIVARY GLANDS IN THE FOUR CLASSES OF VERTEBRATED ANIMALS, BY M. DUVERNOY.

THE author has made his observations on a great number of animals from each of the four classes, the results of which are as follow:

1. The mammifera are the only animals provided with glands belonging to the order of the conglomeratæ.
2. These glands are, however, not to be met with in the cetacea, as has already been noticed by Mr. Cuvier, in his memoir on the porpus (*Delphinus Phocæna*, L.) and the porpoise (*Delphinus Delphis*, L.)
3. They are proportionably smaller in the amphibious mammifera than in the rest.
4. The glandulæ parotideæ, and sublinguales are wanting, which is never the case with the submaxillares. Thus the myrmecophaga, and the echidna, have submaxillares and sublinguales, the first of which are very considerable, but the same animals have no parotides.
5. The herbivorous animals are possessed of a much more considerable salivary system, than is found in the carnivorous kind, which result, though not new, is confirmed by a great number of observations.
6. In the carnivorous and gnawing animals, (*rongeurs*) it often happens, that the proportions of the glandulæ maxillares increase, while that of the parotides decrease, which is sometimes so much the case, that the latter are considerably smaller than the former, as in *didelphis virginiana*, in the genus *vespertilio*, *canis*, *phoca*, *mussylvaticus*, *phascoloma*, &c. and it may be also observed in the

raca,

racca, and the rabbit. These observations seem to indicate a relation between the manner in which the aliments are submitted to the action of the teeth, and the place where the salivary glands issue their liquor. Hence it appears, that in the carnivorous and gnawing kind of animals, in the first of which the canine and incisive teeth, and in the latter the incisives only, perform the most essential part of mastication; the saliva is, on the whole, conducted in a much greater quantity towards the teeth, than in animals where those teeth have not so essential a function. In the tatu, however, and the sloth, the maxillary glands are likewise much larger than the parotides.

7. In the carnivorous tribe the salivary glands are in general much redder, more composed of lobes, and of a firmer texture.

8. The ductus stenorhynchus passes not always through the masseter on its way to the buccinator. In the tatu, the pachyderma, the ruminant animals, and the solipeda, it follows the inferior margin of the former, forming there an arch, the convex part of which is turned downwards.

9. It is often the case, that the sublinguales have one canal only, opening at the side of that of the maxillares, which has been observed in the simia, several carnivorous animals, and the ruminants. In the solipeda, they have several small canals; in the hog, there are two pairs of them, the anterior of which is large and flat with several small excretory canals; whereas the posterior is long, narrow, and provided with only one canal.

10. The molares generally form a considerable prolonged mass, which is situated opposite the superior teeth of the same name, or also near the inferior molar teeth, as in the cat.

11. The buccales and labiales are in general inconsiderable.

12. Some animals have, besides these glands common to the human species, another gland, which, in some, appears to be but a continuation of the molares; it arises beneath the zygomatic arch, behind the os submaxillare, and opens at the extremity of the superior margo alveolaris with sundry small excretory canals, which takes place in oxen, the sheep, and the horse. In the dog, it is separated from the molares, forming a distinct mass, that has only one excretory canal, opening in the same region. This is the same gland which has been described by Nuck in the dog. J. G. Duvernoy has observed it in the serval. The author, however, could not trace it in the cat.

13. In birds, the glands, analogous to the salivary glands of the mammifera, correspond with respect to their situation only to the sublinguales of the latter. They are a collection of small round hollow grains, containing a thick viscid humour, which is conducted to the basis of the palate by numerous small orifices; they are considerable in the gallinacea, but much smaller in the birds of prey, and very minute in water birds. There are two pairs of them in the gallinaceous tribe and in the genus *certhia*; whereas, in the rest, only one pair is to be found.

14. In reptiles, they have frequently the same granular structure as is observed in lizards, and the *tupinamis*, both belonging to the genus *lacerta*. In these animals they are placed immediately under the skin, along the exterior surface of the branches of the maxilla inferior. In the same manner it is found in serpents which have a thin, long, smooth, and forked tongue. In the *amphisbœna*, they have also a granular structure, but they are placed under the tongue between the *musculi genioglossi* and *geniohyoidei*. In the greatest part of the other reptiles, the tongue itself seems to consist of a glandulous texture, and its function to be analogous to that of the preceding glands. This gland is very obvious in the *ranæ* and the *lacertæ*, the *gecko*, *iguana*, *draco*, *chamæleon*, and *stinci*; in all which animals the surface of the tongue is covered with hollow papillæ, in which the salivary humour is separated. In the Greek tortoise, a quantity of small canals are seen on the tongue, which are combined at their basis, and the body thus formed is perforated with many small openings; the tongue of several *ranæ* is likewise formed of a gelatinous substance.

15. In fishes there is no gland analogous to the salivary glands of the other classes. The *rajæ*, however, and the *squali* are provided with glandulous grains, which are situated immediately under the membrane of the palate, opposite the *cartilago transversalis*, which answers the *os hyoideum*, and the great muscular depressor maxillæ inferioris. They seem to pass their humour at the basis of the palate, though this could not be observed on applying a strong pressure. The other fishes offer nothing similar, but they have, like the former, two glandulous strata, more or less thick at the origin of the *œsophagus*, betwixt the interior and the muscular membrane. It is doubtful, whether they ought to be referred to the salivary glands, or whether they be more analogous to the palatic glands of

of birds, or the amygdalæ of the mammifera, which seem to have been placed nearly in the same spot, in order to envelope the aliments on their passage into the œsophagus.

ON THE VEINS OF BONES, BY MR. DUPUYTREN.

THE veins situated in the interior of the bones and cartilages are but little known, because it is impossible to inject them; and, in order to find these canals, it is necessary to search for the trunks at their issue from the bones, or to trace them in the substance of the bones. They generally accompany the arteries, which may be rendered visible by injection. In the flat bones they are discovered by elevating the exterior tabula; and in the other bones, by dividing the extremities as well as the middle part of the bones with the anatomical saw in different directions. The action of acids and the combustion facilitate these researches. In dry bones they are seen to arise from the spongy texture with very fine radiculæ, and afterwards to unite under acute angles for forming branches and trunks. These, though contained within the substance of the bone, permit a circulation, which must differ from that which takes place in the soft parts, at least it needs none of the expedients which physiologists appoint for the circulation in general. The veins of bones are hardly visible in infants, but they are very much dilated, and full, in old people. They vary with respect to the number. On the cranium there are generally three or four on each side, which take their direction towards the basis, where they terminate in other trunks, as the exterior veins, in those that accompany the arteriæ meningeæ, and even in the sinus. There are two of them in each vertebra: they open themselves in the sinus of the posterior surface. The veins of the extremities of the long bones and the cartilages pass to the neighbouring veins. Those veins have, under certain circumstances, occasioned mortal hæmorrhagies.

To

To Dr. BRADLEY.

DEAR SIR,

I Have heard it remarked, that your Miscellany grows less interesting than when first offered to the public. It certainly loses some of the advantages of novelty; and if any reader expects such a collection of original communications should contain no dull papers, we must be less surprised at his disappointment than his expectation. I am however persuaded, that the mistake arises, in great measure, from inattention. Men deeply engaged in business, are apt to take a hasty view of the table of contents, or even of the work itself; and if nothing particularly strikes their eye, the Number is laid down, like a newspaper in a coffee-room, with the common phrase, that *there is nothing new in it.*

To obviate as much as possible this indolence, to which we are all liable, would it not be advisable to be more attentive in your superscription to each article. I have been led to these reflexions in my present retired situation: for having access to few medical books, and much leisure, I have perused every article of your last Number with unusual industry. Nothing but such an event would have induced me to take notice of "Mr. Pulley's case of a dropsical enlargement of the abdomen." Whereas, had the paper been entitled, "*Case of hydatids in the cavity of the abdomen, in which the operation of tapping was performed; with an account of the appearances on dissection;*" few of your medical readers would have passed it over; and, to me, few subjects would have been more interesting. Having selected this paper, I cannot dismiss it without a few remarks, which I doubt not the writer will peruse with the same candour as is conspicuous in every part of his communication.

Hydatids, from the cause he describes, are by no means uncommon, not only in the abdomen, but in other parts of the body. If I am incorrect in my quotations, you will recollect they can only be from memory. A case similar to Mr. Pulley's is given by Dr. Lettsom in one of the volumes of Memoirs of the Medical Society; another occurs in the Edinburgh Medical Essays, and, I believe, in the Medical Transactions. I have given three cases in which hydatids were traced from violence in different parts of the body; one on the authority of Dr. Stokes, another witnessed by Mr. Abernethy and myself at St. Bartho-

Bartholomew's, and a third in the abdomen from a blow. But what I wish particularly to take notice of, is the remark with which the paper concludes. "Whatever," says this equally modest and ingenious writer, "may be the prevailing opinion concerning the formation of hydatids, it would appear, in this instance, that they took their origin from the accident. Inflammation of the peritoneum, doubtless, was the consequence of the kick, and probably an effusion of coagulable lymph, the birth of cystic dropsy. The largest sac was connected with the part that received the inflicted blow; most probably, it was the first formed, and from its rapid increase, possibly it assumed an inflammatory state, and by an effusion of coagulable lymph from its inner surface, might give rise to the existence of those minor hydatids, which were found floating within its cavity. This sac possessed much firmness and density, and certainly was highly vascular."

Nothing can be more reasonable than the conclusion, that the kick and consequent inflammation were the causes of the formation of hydatids. But how can we assume from such premises, that inflammation and the effusion of coagulable lymph should produce a *multiplication* of uniform substances, filled with a transparent fluid that is not coagulable. If this multiplication were the effect of fresh inflammation and effusion, should we not have found the usual symptoms of inflammation occasionally occur? which does not appear by the history of the case. If we admit, as seems almost demonstrated by Dr. J. Hunter, that the hydatid is an animal possessing a life independent of the body in which it grows, excepting by the nourishment it absorbs, we shall I conceive more readily comprehend their multiplication by the analogy we find in other less complicated animals. If any part of the body is rendered useless by a cause which does not deprive it of life, nothing seems more consistent with the economy of nature than that such a part should become the nidus of a race of animals, that can only exist in living animal matter. Hence, if lymph is thrown out, and instead of being reabsorbed, retains its life, and assumes vessels for its support, the same consequences may be expected.

Your readers, and particularly Mr. Pulley, will consider these remarks in no other light than as hints against assigning causes which, without further reasoning, do not appear equal to the effect. If Dr. Hunter's theory of hydatids is thought inconclusive, it seems at least reasonable to

to offer some objections when a new one is started. I trust, however, I shall not be thought to undervalue Mr. Pulley's communication, when my only wish is that he should dilate with more confidence on his own opinions.

I shall conclude this paper with some account of the result of my inquiries concerning the cow-pox inoculation during a journey through all the North-West counties, from Bristol to New Galway. At every town I have taken pains to be introduced to the different practitioners, in order to gain information of anomalous cases by which to ascertain every law in morbid poisons. Sanguine as I was in favour of the practice, I could not help being astonished at the success with which it has been uniformly attended. The deviations from the established laws of the disease have been so few as to afford me no new facts.

The mention of the cow-pox must be my apology if I do not yet conclude. Dr. Jenner has a valuable collection of facts relative to the hydatids and other diseases in brutes. It is much to be wished that he would give them to the world, and at least ascertain the precise characters of the more common maladies to which brutes are liable. Even the grease in the horse is not yet clearly characterized; and the want of precision in this respect has given rise to much misconception and controversy. Let us hope the ingenious writer will not be discouraged from again appearing before the public by those severities which every reformer should prepare himself to receive.

I remain, &c.

JOSEPH ADAMS.

Village of Castle Douglas, near Dumfries, Nov. 1, 1804.

Botanical Description of British Plants.

(Continued from pp. 361—372.)

60. SMYRNIUM. *S. olusatrum*. *Hipposetinum*.

Ang. Asissanders. Common Alexanders.

Gen. Desc. Petals keeled, tapering to a point. Fruit, egg-globular, bulging, angular.

Spec. Desc. Stem leaves by threes, on leaf-stalks, serrated. Root leaves by triple threes. Sheaths of leaves ragged, fringed. *Involucell.* v. short. Central florets male, other herm. Plant smooth, sickly pale green. Flowers green yellow,

J. V. Clarke new and improved Surgical Instruments. No. 4. Journal Vol. III.

Fig. 1.



Fig. 2.

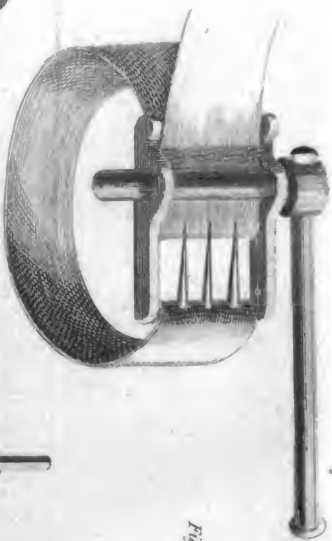


Fig. 3.

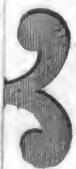


Fig. 4.



yellow. *Ditches, and rocks on the sea coast.* BLOSS. May, June.

Use. Alexanders was formerly cultivated in our gardens, but it is now better supplied by celery, and consequently neglected. It is boiled and greedily eaten by sailors, who happen, on their return from long voyages, to land on the South-west corner of the Isle of Anglesea, where it grows in profusion.—*Pennant.*

61. ANETHUM. *A. faniculum. Faniculum dulce.*

Ang. Fennel. Finckle. Fennel-dill.

Gen. Desc. Petals entire, rolled inwards: Fruit lentil-shaped, compressed; small, scored, bordered.

Spec. Desc. Leaves many-div. hair-like. Seeds egg-oblong, tapering at each end, not bordered, three to five feet high; blue green. *Flowers* yellow. *Chalk Cliffs.* BLOSS. July, August.

Use. This plant was highly esteemed by the ancients for promoting the secretion of milk, an opinion which the experience of some modern authors has tended to confirm. The seeds, though termed one of the four greater hot seeds, and supposed to be *stomachic* and *carminative*, are inferior in their effects to those of dill, anise, and carraway. The seeds used in medicine are usually imported from more southern countries: they give out their virtue very imperfectly in infusion, but by evaporation plentifully.—*Woodville.* They abound with an essential oil which is *carminative* and *diuretic*, but not heating.—*With.* The root, Alston says, may be called *alimentum medicamentosum*; and it was thought by Bergius to possess all the virtue of Ginseng, but it is now wholly disregarded in medicine: to the taste it is sweet, with very little aromatic warmth, and is said to be *pectoral* and *diuretic*. A simple distilled water is directed to be prepared from the fennel seeds.—*Woodville.* The leaves boiled are used in sauce for several kinds of fish, and they are eaten raw with pickled fish. The tender buds are useful in sallads. In Italy the stalks are blanched as a winter sallad.—*Withering.*

62. CARUM. *C. Carui. Cuminum pratense. Caruon.*

Ang. Carraway.

Gen. Desc. Involucr. one leaf. Petals united, bent inwards, notched at the end. Fruit small, elliptical, bulging, roundish, scored.

Spec. Desc. Plant two to three feet high, smooth. Leaves doubly compound: *Leaflets* in sixes, in a sort of whirl. *Involucr.* one to five leaves. *Umbel-sp.* nine to twelve. Florets all

all fertile. Petals white, slightly tinged with red. *Meadows and pastures.* Bloss. May, June.

Use. The seeds are well known to have a pleasant spicy smell, and a warm aromatic taste, and are on this account used for various æconomical purposes. They are esteemed to be *carminative*, *cordial*, and *stomachic*, and are recommended in *dyspepsia*, *flatulencies*, and other symptoms attending hysterical and hypochondriacal disorders; they are likewise reported to be diuretic, and to promote the secretion of milk: they are less frequently employed than formerly.—*Woodville.* The seeds are used in cakes, and often put into bread, especially at Christmas-time. Incrusted with sugar, they are sold by confectioners as *caraway-comfits*; and they are often distilled along with spirituous liquors for the sake of the flavour and heat which they impart. These seeds were formerly recommended by Dioscorides to pale-faced girls, and, in more modern days, their use in that case is not forgotten. They are no despicable remedy in *tertian agues*. They abound with an essential oil which is *antispasmodic* and *carminative*.—*Withering.* Parkinson says, that the roots of this plant when young are a better esculent than parsnips. The tender leaves may be boiled with pot-herbs. Sheep, goats, and swine eat it: horses and cows are not fond of it.—*Ibid.*

63. PIMPINELLA. *P. magna.*

Ang. Great Burnet saxifrage, or anise.

Gen. Desc. Petals bent inwards. Styles upright. Summits nearly globular. Fruit small, egg-oblong, with five elevated ridges.

Spec. Desc. Leaves uniform, winged: leaflets spear shaped, sometimes broader than they are long, irregularly serrated, as if besmeared with oil. Leaf stalks compressed. Stem two to three feet high. Umbel-sp. 14. Pet. white. Hedges, woods. Bloss. Aug. Sept.

Use. This species and the *P. saxifraga*, also a native of Britain, partake very nearly of the same qualities. In speaking of the latter, the medicinal of which however have no remarkable difference from the other, Dr. Woodville says, that the roots have an unpleasant smell and a hot pungent bitterish taste, whence chewing it has been recommended to relieve the *tooth ache*: its virtues are stated by Bergius to be *resolvent*, *diaphoretic*, *stomachic*, *diuretic*. It is recommended by several writers as a stomachic, and in all cases where pituitous humours are thought to prevail; and it is said by Hoffman to be an excellent *emmenagogue*. In the way of gargle it has been employed

employed for dissolving viscid mucus, and to stimulate the tongue, when that organ becomes paralytic. It may be given in doses of a scruple in substance, or in infusion to two drachms.—*Woodville*. The root is so acrid as to burn the mouth like pepper; and, on account of its acrimony, it has been used to cleanse the skin from freckles. It is chewed to promote the secretion of saliva: and in Germany it is prescribed in asthma and dropsy. It affords a blue oil.—*Withering*.

64. *APIUM*. *A. graveolens*. *A. palustre*. *Elcoselinum*, *Paludopium*.

Ang. Smallage. Parsley. *When cultivated*, Celery.

Gen. Desc. Involucr. one leaf. Petals equal. Fruit small, bulging, ribbed. Styles bent.

Spec. Desc. *Stem-leaves* wedge-shaped; root-leaves winged; *leaflets* of three lobes serrated; *stem* smooth, shining, deeply furrowed. *Involucr.* often wanting. *Umbel-sp.* five to eleven; those of *umbellule* eleven to sixteen. *Petals* white. *Ditches and marshes*. Bloss. Aug.

Use. The root in its wild state, when it grows near water, is fetid, acrid and noxious, but when cultivated in dry ground, it loses these properties; and the root with the lower part of the leaf-stalk and stem, blanched by being covered with earth, are eaten raw, boiled in soups, or stewed: in this state of cultivation in the garden, it is known by the name of celery. It is said to be hurtful to those subject to nervous complaints: but it is certainly a good antiscorbutic. The seeds yield an essential oil. Sheep and goats eat it: cows are not fond of it: horses refuse it.—*Withering*.

65. *APIUM*. *A. petroselinum*. *A. hortense*. *A. sativum*.

Ang. Common parsley. Garden parsley.

Gen. Desc. *As above*.

Spec. Desc. *Involucell.* very small; *root leaves* winged, by threes. *Stem-leaves* rise from the sheaths at joints; *leaflets* cut into narrow line or segments, entire. *Umbel-sp.* ten. *Umbellule-sp.* twenty. *Petals* oval, white. Bloss. June, July.

Use. This plant is a native of Sardinia, but it has been so long cultivated in our gardens, and in such frequent use for culinary purposes, as to be more familiar to us than most of our indigenous plants. Both the roots and seeds are directed by the London College for medicinal use: the former have a sweetish taste, accompanied with a slight warmth or flavour, somewhat like that of a carrot: they

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are said to be *aperient* and *diuretic*, and have been employed in apozems to relieve nephritic pains, and obstructions of urine. The seeds are in taste warmer and more aromatic than any other part of the plant, and also manifest a considerable bitterness: like those of many other umbelliferous plants, they possess a share of aromatic and carminative power, but this being inconsiderable, they are now but seldom employed. They have been used externally with advantage for destroying cutaneous insects in children. The bruised leaves have been successfully employed as a discutient poultice in various kinds of tumors; and it is said by *Lange* (*Misc. verit. Med. p. 26,*) that this application has succeeded in scirrhus tumours where cicuta and mercury had failed. Though parsley is in so common use at table, it is remarkable that facts have been adduced to prove that in some constitutions it occasions epilepsy, or at least in those subject to them, aggravates the fits: it has been supposed also to produce inflammation in the eyes.—*Woodville*.

PENTANDRIA. TRIGYNIA:

66. VIBURNUM. *V. Lantana*.

Ang. Wayfaring tree. Pliant mealy tree.

Gen. Desc. Cal. five div. superior. Bloss. five cleft; berry one celled, closed. Seed 1.

Spec. Desc. Leaves oval, serrated, veined, cottony underneath. Flower leaves coloured. Bloss. cloven, white. *Summits* united. *Berries* black: *Woods and hedges*. Bloss. May.

Use. The berries are drying and astringent. The bark of the root is employed for the manufacture of bird-lime. —*Withering*.

67. SAMBUCUS. *S. cebulus*. *S. humilis*.

Ang. Dwarf elder. Wallwort. Danewort.

Gen. Desc. Cal. five-toothed. Bloss. regular, with five shallow clefts. Berry juicy, many-seeded, closed.

Spec. Desc. Tufts with three divisions. *Stipula* leaf-like. *Stem* herbaceous, very brittle, furrowed. *Leaves* winged; leaflets spear shaped, serrated. *Cal.* segm. six, purple. *Bloss.* segm. pointed, white above, purple beneath. *Anthers* purple, properly ten, one on each side of each filament. *Berry* three celled, three seeded. *Hedges and road sides*. Bloss. July.

Use. Every part of the plant has a faint disagreeable smell, resembling that of common elder, but stronger and more

more ungrateful: in the stomach its active power is greater. The root, which has a nauseous bitter taste, was formerly much employed in *dropsies*. A decoction of two drachms of it, or a small quantity of its expressed juice, promotes both the alvine and urinary discharges: if the decoction be prepared from the bark of the fresh root, its activity is so much increased, that it commonly proves both *emetic* and *cathartic*. The inner bark of the stalk, when recent, is equally powerful in evacuating the *primæ viæ*; and its effects as a *diuretic*, Dr. Brocklesby found to be very considerable. The berries, in their recent state, are said by Scopoli (*Flor. Carn.*) to be a gentle *cathartic*, though Haller did not find this effect. The seeds are also *diuretic*, and have been given with advantage in *dropsical* complaints: They also afford an oil, which Haller applied with success in painful affections of the joints. The leaves boiled in wine, and formed into a cataplasm, have been recommended in France as a *discutient* application to contusions and tumours.—*Woodville*. It is esteemed *diuretic* and *aperient*.—*Hill*. The roots are a powerful diuretic; a decoction of them has been found serviceable in the *dropsy*.—*Lightfoot*. It has the same medical properties with the *S. nigra* (see next article), but in some respects more violent, and therefore less manageable. One drachm and a half of the root is a strong purge. The berries give out a violet colour. The green leaves drive away mice from granaries: and the Silesians strew them where their pigs lie, under a persuasion that they prevent some of the diseases to which those animals are liable. Horses, cows, sheep, goats, and swine refuse it.—*Withering*.

68. *SAMBUCUS. S. nigra. S. vulgaris. S. arborea.*

Ang. Elder. Common black elder.

Gen. Desc. As above.

Spec. Desc. Tufts five div. leaflets nearly egg-shaped, serrated. Stem tree-like. Bloss. white. Anthers yellow, one on each filament, arrow shaped. Berries, when ripe, deep black purple. Seeds 3. Woods, damp hedges. Bloss. Apr. May. Note, Parsley-leaved elder is only a variety of this species.

Use. This whole plant has an unpleasant narcotic smell, and some authors have represented it as unsafe to sleep under the shade of elder. The inner bark, flowers and berries are the parts used in medicine, and admitted into the pharmacopœias: the former is strongly *cathartic*, and on this account was much used by Sydenham and Boerhaave, who recommend it as an effectual hydragogue; Sydenham

Sydenham directs three handfuls of it to be boiled in a quart of milk and water, till only a pint remains, of which one half is to be taken night and morning, and repeated for several days: it operates upwards and downwards, and on the evacuations produced, its efficacy depends. Boerhaave gave the expressed juice in doses from a drachm to half an ounce. In smaller doses it is said to be a useful aperient and deobstruent in various chronical disorders. The flowers have an agreeable flavour: in infusion when fresh they are gently *laxative*; when dry, they promote chiefly cuticular excretion, and are serviceable in *erysipelatous* and eruptive disorders. Externally they are used in fomentations and in the form of an ointment. The berries in taste are sweetish, and on expression yield a fine purple juice, which is a useful aperient and resolvent in recent colds and sundry chronical disorders, gently loosening the belly, and promoting urine and perspiration.—*Woodville, see Lewis, M. M.* This juice made into a *rob* is a safe and useful aperient.—*Lightfoot.* The inner green bark, which is an acrid *purgative*, is in smaller doses *diuretic*, and has done eminent service in glandular obstructions and dropsies: if sheep that have the *rot* be placed in a situation where they can get at the bark and the young shoots, they will quickly cure themselves. The leaves, like the bark, are *purgative*, but more nauseous. They are an ingredient in several cooling ointments. A decoction of the *flowers* taken internally is said to promote expectoration in pleurisies: externally, they are used in fomentations to ease pain and abate inflammation; they are used frequently to give a flavour to vinegar. The inner bark is an ingredient in the black dye. The berries are poisonous to poultry, and the flowers to turkeys and peafowl. If turnips, cabbages, corn, or fruit-trees, (which are subject to blight from a variety of insects) be whipped with the green leaves and branches of elder, the insects will not attack them.—*Withering.* (*See Phil. Tr. lril. p. 348*). The leaves bruised are sometimes applied outwardly in a cataplasm, in erysipelas and pleurisy, and are said to be very relaxing.—*Lightfoot.* The *wood* is hard, tough, and yellow; it is commonly made into skewers for butchers, tops for angling rods, and needles for weaving nets: it answers well for turning in the lathe. The pith being exceedingly light, is cut into balls used in electrical experiments.—*Withering.* Sheep eat it: horses, cows, and goats refuse it.—*Linn.* Others say cows are fond of it.

[To be continued.]

CRITICAL

CRITICAL ANALYSIS

OF THE

RECENT PUBLICATIONS

ON THE

DIFFERENT BRANCHES OF PHYSIC, SURGERY,
AND MEDICAL PHILOSOPHY.

A Dissertation on Gout; exhibiting a new View of the Origin, Nature, Cause, Cure and Prevention of that afflicting Disease; illustrated and confirmed by a variety of original and communicated Cases; by R. KINGLAKE, M.D. &c. &c. 8vo. pp. 348. London, 1804.

THIS Dissertation, in so many distinct sections, treats of the "Origin of gout, the nature and constitution of gout; its remote and proximate cause, the cure of gout, and, lastly, its prevention." Some of the opinions of Dr. K. on this subject have been already laid before our readers, in several communications and replies to opponents in former Numbers of our Journal; which he has here republished in an Appendix. This part, which occupies rather more than half the volume, contains also a considerable number of letters, written by other practitioners, some of which are original communications to Dr. K. and some have been published in the Journal.

Those opinions on which Dr. K. appears to lay most stress, may be collected from the following passages, extracted from his recapitulation,

"The earliest records of medicine attest the existence of gouty inflammation; and it has been uniformly considered, rather as a remedial, than a morbid affection.

"This erroneous opinion of its nature, and healthful influence, has survived the correction which enlightened reason afforded to the small-pox, the plague, and other forms of inflammatory diseases, in which stimulant treatment, and inviting and protracting the distemper on the surface, were also adjudged to be the only safe and efficient means of cure; but which unprejudiced observation ultimately proved to be fatally hurtful, and that the very reverse was the most salutary that could be adopted.

"The nature of gout is purely inflammatory, and possesses no peculiar or specific properties to distinguish it from common inflammation, but what are referable to the structure or organization of the affected parts.

"The seat of the gout is exclusively in the ligamentous and tendinous fabric; the texture of which, when inflamed, affords,

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all that is peculiar or characteristic of gout. This fabric therefore is necessary to the constitution of what is called gouty inflammation, which evinces that it cannot occur on any of the visceral or vital organs, as these possess nothing of the ligamentous or tendinous structure.

"The several appellations of gout, rheumatism, and sprain, are only nominally different; they, in fact, describe identity of affection. Any external variation which may present in the degree and progress of the disorder does not alter the fundamental sameness of the disease, which consisting in an inflammatory irritation of the ligamentous and tendinous structure, will exclusively remain such, however variously and capriciously denominated.

"The origin of gout must necessarily be always local, as it can only arise in inflammatory affection of the ligaments and tendons, which are stationed almost exclusively at the joints, and are not co-extended with the system. The peculiar seat of gouty malady at once chains it to the ligamentous and tendinous structure, and gives an undeviating resemblance to its external character. It necessarily originates in every instance in the same natural circumstances, and therefore invariably denotes its existence by the most unequivocal symptoms.

"The diffusion, or propagation, of gout, from the affected joints, is governed by associative or sympathetic influence of motive power; but when arrested on any particular organ, as the brain, stomach, or bowels, it is not characteristic gout in those parts, but simple irritation; the ligamentous and tendinous structure, necessary to gouty inflammation, being wanting in those vital organs. Nor does the local irritation of gout subside by sympathetic distribution, but in the proportion as the severity of pain may have harassed and exhausted the systematic strength. The consequent general debility will then reduce the local inflammation, and occasion those painfully irregular or agitated motions (usually termed spasm) over the system, which always endanger life, and do often actually terminate in death. Gout, therefore, cannot be strictly repelled; and when it subsides, and the system becomes affected, it is the consequence of extreme reduction of constitutional strength, by protracted pain, and which might have been prevented by its seasonable relief.

"The general health can suffer no other injury from gouty inflammation, than what is occasioned by the debilitating and distemp'ring influence of durable irritation; its early removal therefore renders the disease both mild and safe.

"The general symptoms of gouty inflammation will depend on the temperamental, habitual, or morbid excitability of the system at large, or of any particular organ. If equal health should pervade the frame, no serious impression need be dreaded; but if distempered excitability should have fixed its abode on any particular part, the accumulated weight, or concentrated force of sympathetic irritation, may so heavily befall it, as to manifest every

every degree of violence from transient to inflammatory excitement. But whatever be the situation or extent of the morbid impression, its nature will be conformable to the structure and office of the affected part; and not to the character of gouty, or ligamentous and tendinous inflammation.

“ The protracted or natural duration of gout tends to produce irreparable local derangement on the part affected, and a state of the system promptly susceptible of common causes of morbid impression. The diseased joints will, by its long endurance, become contracted, and be farther distempered by altered structure, by calcareous or osseous, and other vitiated secretions; while the general motive powers of the system will be tremblingly alive to every occurring irritation. This deep and complicated mischief is only to be obviated by an early and radical removal of the disease.

“ Gouty inflammation, like most other diseases, acquires by frequent recurrence a facility of return, which soon becomes habitual. The ordinances of health owe much of their fixation and uniformity to the influence of incessant or uninterrupted continuance; those of disease become similarly radicated by long usage. It is therefore of vast importance in a curative view, that an ailment should not become habitually inveterate, and that the gout should, in every stage of its duration, be circumvented and subdued in the most expeditious and efficacious manner, to obviate its familiar or customary establishment.

“ Excessive heat has been alleged to be the proximate cause of gout, or to be the disease itself; which obviously suggests as an appropriate indication of cure, an early and unremitted endeavour to allay the morbid temperature on the affected parts, and that the means of reducing it should be proportioned or commensurate to the violence of the disease.

“ Cold water is the universal boon of nature, the common medium of salutary temperature, as derived from the repulsive or motive conditions of the atmosphere; its uniform application, therefore, to parts suffering under gouty inflammation, by either ablution, showering, or immersion, is a remedy as efficacious as simple for that malady. Inveterate cases, or the high temperature of tropical climates, may (though very rarely) require the aid of artificial cold, obtained from a solution of neutral salts in water, effectually to extinguish the inflammatory heat. The application of diminished temperature should be uninterruptedly continued, until the painful sense of heat be reduced. This usually happens within forty-eight hours, almost invariably before the expiration of seventy-two hours. The avoidance of all dietetic, medicinal, and mental excitement, at the same time, would likewise greatly co-operate in the intention of cure.

“ Costiveness should be removed, or obviated, by occasional laxatives. Neither purging, nor an increase of any other evacuation,

tion, is necessary, and by breaking the general strength may prove hurtful.

"The convalescence of gout will require the same attention to further and confirm its progress, as is necessary in that of other violent diseases. A well-conducted plan of nutriment should be regarded as of the first importance in expediting and ensuring perfect recovery. Local friction also, and even topical warm bathing, would be advisable, if an unyielding sense of either torpor or coldness should prevail on the affected part.

"Should a relapse actually occur, it should be treated as the original attack, with such adaptations as the circumstances of aggravated or diminished violence may require.

"Gouty ailment may be either obviated, or arrested in its forming stage, so as to prevent its developement, by resisting the earliest approach of excessive temperature, either generally or locally, by topical cold, aqueous dilution, abstemious diet, cool apartments, avoidance of costiveness, and every other source of morbid excitement, whether universal or partial."

Improvements in medicine are made more slowly than in other sciences, because they are opposed by self interest and prejudice. It becomes necessary therefore, from time to time, to recall the attention of the profession to the errors and prejudices of former practitioners. This appears to have been Dr. K's view in his present work; and there is no doubt that he will have many admirers and many opponents, so that the cause of science cannot fail to be promoted.

Dr. Rowley's Scholæ Medicinæ,

Concluded from pp. 469—473 of the last Number.

AFTER the history and chronology of medicine down to the 19th century, Dr. R. addresses a short admonition to students, respecting the best mode of acquiring a correct knowledge of the different branches of the science.

The Second Part, which may be considered as the principal one, and which occupies 104 pages of letter-press, besides the numerous plates, is devoted to the several branches of anatomy. Novelty, or originality, is not to be expected on these subjects; judgment in selecting and arranging, perspicuity in explaining, and a happy illustration by good plates, are all that can be expected; and in these, Dr. R. has not been defective. We discover in every part of his work a great solicitude to consult the memory of the student; and in order to do this, he disposes his subjects in a tabular form, when it can be done conveniently, and indulges in frequent repetitions, for the sake of placing the facts in various points of view, or recapitulating what is most necessary to be remembered. An instance of this kind occurs in the beginning of the Third Part, where we find a Compendium or Abridgment of the Second Part. This is followed by an abridged Physiology, Pathology, and Symptomatology. The work is concluded by an account of the Marblebone Infirmary, considered as a School of Medicine.

A Medical

A Medical Glossary, in which the Words in the various Branches of Medicine are deduced from their original Languages, properly accented and explained. By W. TURTON, M. D. 4to. pp. 622. London, 1797.

As the author of this correct and useful work understood his own views and objects in publishing it better than any other person, we prefer his account of them to any we could give.

"Medicine, like all other arts, has its distinct family of terms and idioms, conveying meanings peculiar and appropriate to its several branches; and the very numerous sources from which these have been collected, have made it not easy for its professors sufficiently to understand the language of their science.

"I have therefore brought together such as usage has fixed, or learned men have adopted, and have contented myself with deducing them from their proper roots, determining their pronunciation, and simply defining them.

"The unmeaning jargon of Paracelsus and his followers I have purposely omitted, and have been solicitous to preserve those compound words used by the physicians of the Greek school, most or all of which are scattered about in the writings of succeeding ages. My authorities are chiefly derived from Blanchard, Castellus, Minshew, Schindler, and Golius.

"That such a work is useful, will perhaps be more readily admitted than that it has been usefully executed; but he that has laboured long in attempting to remove the obstructions to science, is not willing to add despondence to his difficulties, and to believe that he has laboured in vain."

The modesty of the title, the correctness and perspicuity of the definitions or explanations of the words, almost disarm the hostility of criticism, if we were ever disposed to indulge in it; but we think no Lexicographer has a right or power to say, this is hereafter to be the language of these branches of science. Dr. Johnson, in his Dictionary, has purposely omitted many words which ought to have been retained, because he thought the English language better without them, or because he did not find such authorities for their use as he approved of. Dr. T. has imitated his example; and this is our only objection to the Glossary.

Pharmacopœia Medici Practici Universalis, sistens Medicamenta Praeparata et Composita, cum eorum Usu et Dosibus. Auctore F. SWEDIAUR, M. D. Two Vol. pp. 501. London, 1803.

THIS valuable compendium of practical pharmacy well merits the attention of the medical public from the pains which obviously have been taken in the selection, and the general accuracy with which the precepts for the preparation of the various articles of *Materia Medica* are laid down. It will also the more interest the English practitioner, as it contains some articles not generally in

use, and some varieties in the preparation of several of the substances used in medicine.

The Preface begins by asserting the originality of the present compilation of prescriptions, for the greater number of which he acknowledges his obligations to the experience of the successful practice of many of the London Hospitals. Indeed, in this point of view, we apprehend that his work will be still more acceptable to the French practitioners than to our own. The nomenclature of the chemical preparations is that which is now universally adopted by chemists; in the vegetable kingdom the Linnæan is strictly followed. Among other alterations the term *terebinthina* is substituted for *balsamum* (for example, *terebinthina copaiferae officinalis*, instead of *balsamum copaivae*) and with prudent caution the name *tinctura sedatiza* is made to supply the place of *T. opii*.

We pass over the author's severe censure on the (supposed) Hippocratic practice, which renders the physician rather a calm spectator of the progress of disease than a vigorous opposer of its ravages, and proceed to a short view of the contents of the work itself.

The purely chemical part of Pharmacy, the preparation of the acids, alkalies, neutral and earthy salts, begins the volume. Among the less common of these articles of *Materia Medica* are Wertendorf's radical vinegar, made by distilling acetite of soda with sulphuric acid; the citric acid concentrated by frost and mixed with sugar to a dry lemonade; the oxygenated muriatic acid; the phosphoric acid; the sulphite of soda; and the citrates of all the alkalies. Whether many of these will prove permanent acquisitions of value to the *Materia Medica* appears very doubtful. In a very few instances the directions for the preparation of these salts are defective, but in general they are given with great precision and accuracy. The following quotation will serve as examples of the author's manner of describing, as well as his style of writing that language, the use of which he so strongly insists on in his Preface.

“ ACIDUM CITRICUM.

“ *SYN.* *Acidum citri depuratum s. concentratum; acidum limoniorum; succus citri s. limoniorum concentratus.* G. *Acide citrique.*

“ *R.* *Succi fructus citri medicæ maturi expressi et probe defæcati quantum placet.*

“ *Expone in vase vitreo in balneo aquæ gradui caloris 212° th. Fahr. (80° R.) unde pars ejusdem coagulatur, qua abjecta acidum remansens concentratum et purificatum in vasis probe clausis longo tempore bonum conservari potest.*

“ ACIDUM CITRICUM, gelu concentratum.

“ *R.* *Succi ex fructu citri medicæ maturo in loco ejus natali expressi et probe defæcati quantum placet.*

“ *Expone gradui frigoris inter 23° et 26° th. Fahr. (inter 3 et 4° infra zero th. R.) constanter et diligenter tollendo glaciem prout formatur; vel pertundendo glaciem effunde succum concentratum*

tratum in aliud vas, et sic repetitis vicibus congelationem repete, ita ut non nisi una tertia pars succi remaneat, qui in vasis probe repletis et clausis longo tempore sanus servari potest.

“ Si hujus succi sic concentrati pars una cum partibus sex sacchari albi probe siccati et pulv. misceatur lentis intervallis ita ut saccharum post singulam instillationem succi tempus siccandi habeat, dein ad finem tota massa trituretur, obtinetur *limonada sicca*, quæ in vasis probe clausis usui servetur.

“ Pars hujus pulveris in aqua soluta dat limonadam gratam ex tempore quando placet parandam.

“ N. B. Prof. Vauquelin, observavit gummi quodcumque in aqua solutum, in acidum citricum mutari, si per hanc solutionem gaz acidum muriaticum oxygenatum transire cogitur.

“ ACIDUM MURIATICUM, concentratum.

“ **SYN.** *Acidum muriaticum fumans; spiritus salis fumans Glauberi; acidum salis; spiritus salis marini acidus. G. acide muriatiquæ.*

“ Gravitas ejus specifica ad pondus aquæ destillatæ sit ut 1,170 ad 1,000.

“ R. Muriatis sodæ siccati et pulv. libras quatuor.

“ Inde in retortam tubulatum quæ in balneo arenæ locata jungatur cum apparatu destillatorio *Woulfiano*, in quo prævie aquæ destillatæ uncia sedecim distribuuntur. Commissuris omnibus probe luto obductis, postquam lutum ubique bene siccatum fuerit, adjice per aperturam tubuli lente et caute:

“ Acidi sulphurici concentrati, libras duas. Postquam effervescentia subsedit, ignem sensim administra, donec massa bulliat; gaz acidum quod in primum excipulum transit, cum aqua destillato ibidem præsentē sese jungens format *Acidum muriaticum concentratum* perfecte limpidum et fumans. Vapores in secundum et tertium excipulum transeuntes, ibique aquæ sese jungentes *Acidum muriaticum dilutum* constituunt quod impregnando majori quantitate vaporum acidorum, æque concentratum reddi potest ac primum.

Usus, aquâ *diluti*: Ischuria renalis; dysuria.—*Concentrati* cum melle *externus*: Aphthæ.—*Item* ad varia præparata pharmaceutica.—Forma vaporum ad putrida aëris effluvia corrigenda.”

After these follow the very important class of metallic salts. In the list of metals gold is still retained, very inconsistently in a book which so confidently assumes the merit of excluding all antiquated absurdities; but though the name is retained, the single preparation of this metal is omitted. Under each metal the oxyds are first described, then the salts, and lastly the sulphurets. We shall only notice the rarer of these. M. Vauquelin's convenient method of preparing the *martial ethiops* or *black oxyd of iron* is the following. Mix two parts of fine iron filings with one of the *red oxyd of iron* (*crocus martis*), heat them in a covered crucible with a strong fire for an hour, and when cold reduce the coherent mass to a fine powder, which is the black oxyd. The old and well known mode

of making the same preparation by moistening iron filings with water and long exposure to air (originally Lennery's) is here introduced with trifling variation, and is ascribed to one Cavezalli, who, it would seem, has had the assurance to claim the invention.

In the important subject of mercurial preparations the author is already favourably known to the public, having formerly, in his *Pharmacopœia Syphilitica*, exhibited a very full view of the various useful salts and oxyds of this metal. *The black oxyd of mercury by triture, or by ammonia* is not commonly met with in our shops. Its preparation is thus described :

“ OXYDUM HYDRARGYRI nigrum.

“ SYN. *Æthiops per se; æthiops mercurii simplex; mercurius præcipitatus niger; turpethum nigrum; calx mercurii nigra; mercurius extinctus; mercurius gummosus; mercurius alcalisatus; hydrargyrum cum creta.* Ph. L. *Mercurius solubilis.* HAHNEMAN. *Hydrargyrum oxydulatum nigrum.* Ph. B. G. *Oxide mercuriel noirâtre.*

“ R. Hydrargyri purificati quantum placet. In vase ferreo per plures menses, vel tamdiu continuo agita, aëre sæpe renovato, donec in pulverem griseo-nigrum mutetur.

“ Vel. R. Nitratis hydrargyri liquidi libram unam. Aquæ destillatæ libras decem. Instilla paulatim, Ammoniæ quantum satis; Id est tamdiu nec ultra, quam præcipitatum inde enatum colore nigro apparet. Pulverem nigrum præcipitatum aquæ destillatæ probe ablutum sicca, et in vase vitreo clauso in loco obscuro usui serva.

“ Vel melius, Methodo SCHULTZE.

“ R. Acidi nitrici concentrati partem unam. Immitte in vas vitreum longo collo instructum et adjice Aquæ destillatæ partes quatuor. Mixtis adde, hydrargyri partes quatuor.

“ Expone in balneo arenæ caloris gradui th. Fahr. 120—140 (40—48° th. R.) tamdiu donec vesiculæ in superficie liquoris nullæ amplius appareant, id est, donec actio acidi in metallum cesset.—Dein ignem auge ad 200—210° th. Fahr. (75—78° th. R.) et sic continua per tres aut quatuor horas; tunc bulliat massa per mediam horam. Dein liquorem bullientem in vas vitreum effunde, in quo prævie 50 partes aquæ destillatæ positæ fuerint, et probe agitando misce.—

“ Si durante coctione aut digestionem crystalli formantur, illico aqua fervida affundatur et pro re nata etiam pauxillum acidi nitrici.—Ad finem operationis hydrargyri pars in fundo maneat; vel si totum solutum fuerit, addatur portio hydrargyri.

“ Solutio mox dicta filtretur eique instilletur gradatim ammoniacæ, donec nil amplius pulveris nigri præcipitetur. Pulvis niger, aqua destillatæ frigida probe edulcoratus, per papyrum album filtretur et perfecte siccetur. Massa siccata papyro griseo duplici involvatur et pondere gradatim aucto probe comprimatur ita ut aqua omnis exprimatur.—Dein pulvis extensus super papyrum gradu 70° th. Fahr. (17° th. R.) siccetur sed non majori.

“ Usus: Pro parandis variis compositis.

“ Dosis: Grana duo—sex—octo de die,”

The

The single article under *manganese* is the black oxyd, and its alleged use (besides assisting in the oxygenated muriatic acid) is to be externally applied as an ointment for cutaneous eruptions, but its use is doubtful.

Under *Stannum*, the pulvis stanni is properly designated as the *Oxydum Stanni Griseum*.

Under *Stibium*, Mr. Justamond's arsenical caustic of antimony and arsenic is given with approbation.

The emetic tartar, the author prepares with the white oxyd or powder of algaroth, but as this triple salt of antimony, potash, and tartareous acid is found often to vary in its composition, the simple tartrite of antimony is recommended in preference. It is prepared merely by dissolving the white antimonial oxyde in tartareous acid, and evaporating the solution to dryness.

To the metallic salts succeed the *Sulphurets*, the only one of which worthy of remark, is the sulphuret of ammonia, made by passing sulphurated hydrogen gas through liquid caustic ammonia. The gas may be extricated either by sulphuret of iron and muriatic acid, or simply by heating the liquid sulphuret of pot-ash.

A few preparations under the title of *Sapones* follow. The intimate union of soap with the more powerful gum-resins, has, with reason, been thought to improve their efficacy, and render them more soluble in the stomach. They are also convenient to be exhibited in the form of pills. These are very intimately mixed by being together dissolved in alcohol, as the author prescribes, and the solution evaporated to a pillular consistence.

The class of *Inflammabilia* includes charcoal, sulphur, phosphorus, resins, oils, and animal fats. The purification of camphor by solution in alcohol and precipitation, is a needless refinement. The following is an imitation of the Indian volatile oil of camphor, so much extolled in rheumatic and gouty cases as an external application. "Mix half a pound of camphor with two pounds of dry pipe clay, and distill in a glass retort with a very slow fire. An acid liquor passes into the receiver, together with a fine volatile oil, and a thick butyraceous oil concentered in the neck of the retort. The volatile oil is to be separated and kept for use.

Among the aethers is given Klaproth's *Acetated Ethereal Tincture of Iron*. It is nine ounces of liquid acetite of iron, mixed with three ounces of acetic ethereal spirit, the preparation of which is also given. A medicine of similar virtues is the nervine tincture, made with muriated iron and sulphuric ether. The whole section on ethers is valuable.

The article *gaza* (gasses) is much too scanty to give any real assistance to the preparer (oxygen excepted).

This composition of a few of the most celebrated of the natural or factitious mineral waters is added.

The second part of this Pharmacopæia, is a large selection of formulæ for the use of the practitioner, arranged according to the form of exhibition. Of these, many are selected from various sources

sources of acknowledged authority, both in this country and on the continent; the Pharmacopœias of Copenhagen, London, Edinburgh, Stockholm, and Berlin, have furnished others, and a few appear to originate from the author's own experience. In general they are simple, elegant, and well put together, and the number is sufficient to afford a much greater variety than any practitioner is in the habit of employing. The use and the dose of each formula are added in a few words. The following will serve as an example.

“**SOLUTIO CAMPHORÆ AQUOSA.** R. Aquæ acido carbonico saturatæ libras duas. Camphoræ drachmas duas. Misce.

“N. B. Camphora per se in aqua non solubilis, aqua gaze acido carbonico saturata perfecte solvitur, et sic medicamentum præstat egregium in cardialgia spasmodica, singultu, vomitu rebellibus.

“*Vel:* R. Camphoræ drachmam unam. Alcoholis quantum opus. Ut fiat solutio, cui adde Aquæ destillatæ fervidæ, libras duas. Probe simul agitatum liquorem cola.

“*Vel:* R. Camphoræ, Gummi-resinæ myrrhæ, ana drachmam unam. Simul probe tere, et paulatim adde Aquæ destillatæ fervidæ libram unam. Frigefactum liquorem cola.

“Usus præcipue pro ægris qui camphoram forma pulveris vel alcohole solutam fere non possunt: Blechropyræ; spasmi; cardialgia; stranguria.

“Dosis: Uncia una—duæ, sæpius de die.”

The names of diseases are chiefly those of Sauvages, of which the English reader, who is more familiar with those of Cullen, should be aware. The names given to the materia medica are, as before mentioned, those of Linnæus and of the French chemical nomenclature: and, in some instances, the passion for including a definition in a name has led the author to a ludicrous degree of periphrasis, witness his *Substantia unguinosa (vulgo moschus dicta)*; *Nidus mollis zoophyti, (spongia officinalis)*; *Involutrum reticularis nuclei nucis myristicæ moschatae, &c.*

A new remedy proposed for intermittent fever by M. Seguin, (a tanner of Paris, well known by his valuable chemical inquiries into the principles of his art) is here added, with expressions of great confidence in its efficacy. The remedy is the simplest possible, being only a clarified solution of glue, mixed with sugar into a palatable jelly. The following is the formula.

“**GELATINA AD DIALEIPYRAS.** R. Glutinis animalis indurati vulgo venalis libram unam. Aquæ libras sex. Coque ut fiat solutio, cui adjice Albuminis ovi quantum satis. Dein massæ probe despumatæ et clarificatæ adde Sacchari albi libram unam. Coque leni igne ad libras tres. Gelatinam sic paratam effunde ut concreseat.

“Usus: Dialeipyra variæ. Hoc remedium simplex et mite ad dialeipyras varias radicaliter curandas efficacissimum nuperrime invenit Armand Seguin.

“Dosis *infantibus*: Drachmæ duæ-quatuor. *Mediæ ætatis et delicatulis*: Drachmæ quatuor-duodecim. *Adultis*: Drachmæ duodecim-

duodecim-quadraginta. Prima dosis exhibenda est mox incipiente paroxysmo, præmissis, si opus, præmittendis; et tempore apyrexiae ter die, continuando per aliquot dies post-quam febris cessavit. Plerumque intra paucos dies febris radicaliter tollitur."

The author announces a Pharmacopœia Chirurgicæ as ready for publication, to which the utility of the present work makes us look with expectation of deriving real advantage.

A Meteorological Table, by Dr. HIGGINS, of Brompton.

Days of the Month.	Thermometer, Fahrenheit.			Centigrade.	Height of the Barometer, Inches.			Deg. of Evaporation by the Hygrometer.	WEATHER.
	8 o'Clock Morning.	Noon.	10 o'Clock Night.		8 o'Clock Morning.	Noon.	10 o'Clock Night.		
Oct. 2.	59	62	51	16.66	30.04	30.01	30.04	28	Fair, with flying clouds.
21	57	60	54	13.55	29.93	29.84	29.72	21	Ditto, with rain in the night.
22	56	57	44	13.88	.52	.48	.54	20	Stormy, an Aurora Borealis in the Even.
23	41	54	43	12.22	.72	.76	.54	29	Fair.
24	47	52	48	11.11	.96	.90	.99	28	Fair.
25	45	52	47	11.11	30.00	30.01	30.00	21	Cloudy, rain in the night.
26	52	58	50	14.44	.00	29.98	.00	23	Ditto, rain in the evening.
27	50	51	45	10.55	29.97	.95	29.94	18	Showery.
28	47	56	48	13.33	.90	.87	.77	20	Ditto, with rain in the night.
29	47	51	49	10.55	.75	.69	.58	17	Rain.
30	50	55	48	12.77	.40	.31	.35	28	Showery.
31	50	60	50	15.55	.52	.59	.63	20	Cloudy, rain in the evening.
Nov. 1	50	57	48	13.88	.63	.67	.85	16	Cloudy, rain at night.
2	49	57	47	13.88	.91	.96	30.30	21	Showery, wind and rain at night.
3	46	51	42	10.55	30.38	30.67	.71	30	Windy.
4	42	44	41	6.66	.54	.41	.31	26	Windy.
5	40	42	36	5.55	.26	.26	.29	22	Cloudy, with wind.
6	38	40	36	4.44	.35	.36	.33	23	Cloudy.
7	39	46	43	7.77	.31	.12	29.90	17	Foggy.
8	51	52	47	11.11	29.71	29.59	.52	12	Rain.
9	41	44	46	6.66	.55	.57	.56	16	Foggy, rain at night.
10	51	56	52	13.33	.33	.26	.39	8	Rain.
11	51	50	46	10.00	.34	.37	.94	13	Rain.
12	47	56	50	13.33	30.21	30.23	30.18	14	Showery.
13	51	58	50	14.44	29.92	29.89	29.85	12	Showery.
14	51	53	50	11.66	.79	.75	.80	10	Rain.
15	43	44	42	6.66	30.05	30.09	30.19	16	Small rain.
16	43	46	44	7.77	.30	.33	.37	14	Small rain.
17	46	51	44	0.95	.46	.47	.53	18	Cloudy, rain in the night.
18	45	50	46	10.00	.54	.55	.53	16	Cloudy, with rain at night.
19	50	52	46	11.11	.44	.30	.31	14	Rain.

*Account of Diseases in an Eastern District of London,
from October 20, to November 20, 1804.*

ACUTE DISEASES.		Amenorrhœa - - - - -		5
Typhus - - - - -	4	Chlorosis - - - - -		2
Ephamera - - - - -	5	Diarrhœa - - - - -		20
Dysenteria - - - - -	6	Vermes - - - - -		2
Variola - - - - -	2	Rheumatismus Chronicus		20
Rheumatismus Acutus -	3	PUERPERAL DISEASES.		
CHRONIC DISEASES.		Ephamera - - - - -		7
Catarrhus - - - - -	3	Menorrhagia Lochialis -		4
Tussis - - - - -	17	Mastodynia - - - - -		3
Dyspnœa - - - - -	15	Hæmorrhoids - - - - -		2
Tussis cum Dyspnœa -	20	INFANTILE DISEASES.		
Hæmoptoe - - - - -	2	Aphthæ - - - - -		7
Phthisis Pulmonalis -	4	Diarrhœa - - - - -		14
Hydrops Pectoris - -	3	Ophthalmia - - - - -		3
Menorrhagia - - - - -	2	Ophthalmia Purulenta -		2
Dysmenorrhœa - - - -	2	Herpes - - - - -		5

Typhus, which for a considerable time appeared very seldom, has lately resumed its place in our list of diseases. It has occurred more frequently within the last three or four months than it has for a long period; nor has it always appeared in its mildest form: In most instances the symptoms have been formidable, and in some cases the disease has proved fatal.

In addition to the usual symptoms, affections of the head have prevailed to an uncommon degree, so as to excite considerable alarm, even at a time when the pulse and other symptoms did not lead the practitioner to form an unfavourable opinion of the result.

In some cases convulsive motions of the face and of the different extremities have occurred, the former approaching to the disease called the risus sardonicus, and the latter accompanied with a kind of spasm of the fingers.

When these appearances have been observed, the fatal catastrophe has soon succeeded, much sooner indeed than might have been expected from merely observing the state of the pulse, and other indications of debility.

MEDICAL AND PHYSICAL INTELLIGENCE.

[FOREIGN AND DOMESTIC.]

The "Report of a Medical Committee on the Cases of supposed Small-pox after Vaccination, which occurred in Fullwood's Rents, Holborn, in August and September, 1804, with an Account of some subsequent Inoculations," having been published as we were committing our last sheet to the press, we are anxious to give our readers the earliest, though it must be but a short and most hasty notice of it. The following is the commencement of the Report.

"The cases of two children in Fullwood's Rents, Holborn, said to be cases of small-pox after vaccination, having very much engaged the attention of the public, as well as that of the faculty, it was thought expedient by a numerous body of medical practitioners, met at the house of Messrs. Morgan and Wigham, in Holborn, on Wednesday, October the 3d. 1804, to form a Committee for the purpose of investigating the minute particulars of each case, and of making some experiments, calculated to remove every doubt on the subject.

"A committee was accordingly formed, consisting of the following gentlemen:—Dr. Gower, Dr. Ash, Dr. Pemberton, Dr. Willan, Dr. Temple, Dr. Clarke, Dr. Croft, Dr. Yelloly, Dr. Skey, Mr. Hurlock, Mr. Addington, Mr. Pears, Mr. Morgan, Mr. Wigham."

As the objects of attention had both been vacciolated at the Small-Pox Hospital, a correct copy of the particulars respecting their inoculation was obtained from the register of that Institution, and is given in the Report. The cases of these two children, under the eruptions in question, are first described. With matter taken from the younger child, a series of inoculations was instituted. Cases 3 and 4 give the result of the first experiments. Cases 5, 6, and 7 were inoculated from 3; and 8 was afterwards inoculated from 7; all of which were considered to have the variolous disease produced by the inoculations. Case 8 was even re-inoculated with variolous matter, "with a wish to satisfy some practitioners who could not persuade themselves that the eruption on the child from whom the matter was taken was the small-pox, but who supposed it might be either generically different from the variolous eruption, or some modification of it that would not emancipate the constitution from being again affected with the genuine disease." Case 9 was inoculated from 6; but having been vacciolated at the Small-pox Hospital three years ago, he only was affected similarly to the cases of Mr. Crichton and others,
who

who have subjected their vacciolated patients to the test of various inoculation. As he slept in the same bed with 5 and 6, his brothers, while they were under inoculation, the Committee consider him to have resisted both the contagion and inoculation of small-pox.

The following is the conclusion of their Report :

“ After having faithfully reported the particulars of the investigation proposed, (page 3), the Committee begs leave to observe, that there seems no reason to question the regular progress of the vaccination in Nancy and Mary Hodges, nor the existence of the small-pox more than two years afterwards in the latter, there being no material variation from the usual course of symptoms, either in the disease of Mary Hodges, or in the cases of inoculation with matter taken from her pustules.—The Committee, however, feels it a duty to remark, that the above facts are not to be considered as militating against the general practice of vaccination. Some well authenticated, though rare, cases have been stated, in which the natural small-pox occurred twice in the same person. A few other instances are recorded of persons, who, after having undergone the inoculated small-pox, nevertheless took the disease by infection: yet these cases were not deemed conclusive against the advantages of variolous inoculation, nor do they seem to have impeded its progress.

“ In every country where European science is diffused, the general preventive power of vaccine inoculation with regard to the small-pox, has been fully ascertained, and cannot now be affected by the result of a few detached cases, which, by future observations and experiments, may be accounted for satisfactorily—The Committee, therefore, with one accord, subscribes to the established opinion, that if vaccination were universally adopted, it would afford the means of finally exterminating the Small-pox.”

- **Mr. BUCHHOLZ** has made some experiments on the hydrargyrus muriatus mitis (mercurius dulcis). The common method of preparing this salt is by sublimation of seven parts of mercury and three parts of oxygenated muriat of mercury; the precipitation adopted by Scheele having been laid aside, because apothecaries are of opinion that this production on being mixed with lime water or alkaline solutions does not sufficiently blacken those substances. The author, therefore, examines whether these productions be really different from one another. For this purpose equal parts of mercury and of nitric acid are mixed together, and left for some time in the cold; it is then exposed to a gentle heat in a sand bath till it begins to boil, after which the liquor is poured, whilst hot, into a solution of muriat of soda, that contains equal parts of this alkali, and mercury. The precipitate obtained by water saturated with sal ammoniac or muriat of ammonia, is boiled and carefully washed; a copious production is obtained; and the author proves, by a series of experiments, that it does not differ from that obtained by corrosive sublimate; this method also appears to him more advantageous, and less dangerous than that by sublimation.

Mr. SCHMIDT has made the following experiment on the decomposition of sulphat of pot-ash and of sulphat of soda, in the dry way, by means of quick lime. On igniting for half an hour a mixture of three parts of quick lime and two parts of sulphat of pot-ash, afterwards dissolving the mixture and evaporating the liquor, carbonat and sulphat of lime will be precipitated, whilst a small quantity of carbonat of pot-ash remains in the water. He made the same experiments with sulphat of soda, the results of which were more successful, and the decomposition more complete. It is therefore certain that the decomposition of these two sulphats takes place by quick lime, but that these processes do not appear to be very profitable.

Mr. Dupuytren on the Formation of the Larynx in Eunuchs.

There exists in the animal economy several instances of the influence which takes place between organs that are not contiguous to one another; one of the most remarkable instances of this kind is the sympathy which subsists between the testicles and the organs of voice. The larynx is observed to develop itself in several animals during the rutting season, and the smallness of the larynx, the narrowness of the glottis, and the shrill voice, coincide with the state of the inactivity which the testicles show before the approach of puberty. This period however being arrived, the organs for seminal secretions are developed, and become active, while, at the same time, the larynx rapidly increases in males, and the voice takes that grave sound which makes one of the characters of virility. But, on the contrary, when the testicles are cut away before this period, the source of the phenomena which characterise it vanishes, and the organs of voice remain in a state of imperfection. Mr. Dupuytren has lately had an opportunity of confirming the justness of the observation by dissecting the larynx of a man who had been castrated in his infancy, as he found this organ to be one third less than it is met with in most men of the same age and habit. The glottis was very narrow, and all the organs of voice rather resembled those of a woman, or a youth before the period of puberty.

On Heat disengaged by the Compression of Air.—A very curious experiment has been lately repeated before the National Institute. On forcibly and rapidly compressing the air in the pump of a wind gun, a considerable heat is disengaged at the first push of the piston, sufficient to inflame a piece of tinder which is placed within the pump. When the body of the pump is terminated with a mobile end, closely screwed to it, having in its centre a strong glass lens, a vivid and brilliant light will be seen, which is suddenly disengaged by the first push of the piston. This discovery is said to have been accidentally made by a workman in the manufactory of fire-arms, at St. Etienne. It has been successfully repeated by Mr. Mollet, of Lyons, and certainly deserves the notice of naturalists, as it may tend to explain the nature of light and heat.

Mr. J. C. SAUNDERS, Demonstrator of Practical Anatomy at St. Thomas's Hospital, has lately published a Proposal for the Establishment of a Dispensary for the Relief of Persons afflicted with Diseases of the Eye and the Ear; which has been recommended to the public by the signatures of all the physicians and surgeons of St. Thomas's and Guy's Hospitals. The following is the plan upon which it is to be conducted.

1. That a Dispensary be opened for the benefit of the poor, who are afflicted with diseases of the eye and the ear, where they may apply, and obtain medicines gratis.

2. That the Dispensary be central in its Situation, and contain two beds for the reception of patients who undergo the operation for the cataract, or any other operation of the eye requiring minute care.

3. That the Charity may be established at as little expence as possible, it is suggested that a house of a very moderate rent, will be sufficient for all the purposes of this charity.

4 That a person contributing an annual subscription of One Guinea, be a Governor, and have the right of recommending, and keeping under the care of the charity, one out-patient; or two, if his subscription amounts to Two Guineas.

5. That Persons afflicted with cases, which make it necessary that they should be received into the house, shall be received according to priority of recommendation.

A second edition of Dr. TROTTER's Essay, Medical, Philosophical, and Chemical, corrected and enlarged, is now in the press, and will be published in the course of the ensuing month.—French and German translations of this Essay are announced at Paris and Vienna.

TO CORRESPONDENTS.

Mr. CHAMBERLAINE's work on Worms and Vermifuges will be noticed in our next Number.

Communications are received from Drs. Adams, Turner, and Kinglake, Messrs. Hall, Simmons, Low, Davies, Crowfoot, Whitlam, Ryal, Bond, Chamberlaine, Peal, Shearly, Williams, Philologus, T. R. Humanus, and II.

ERRATA.

- P. 448, l. 12, for Pazzoni, read Pezzoni.
 459, l. 21, for Weenda, read Weende.
 463, l. 1, for Doctorem, read Doctorem.

END OF VOL. XII.

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